

TEACHERS SERVICE COMMISSION



BANK FORM

SCHOOL & ADDRESS;

Cell Phone No. _____

THE SECRETARY
TEACHERS SERVICE COMMISSION
PRIVATE BAG
NAIROBI.

THRO'
THE HEADTEACHER/DEO/MEO*

PAYPOINT PARTICULARS

BANK _____ BRANCH _____

STREET/ BUILDING _____

PROVINCE / DISTRICT _____

TSC DEPT SPECIFY [Primary/ Secondary]

TSC/PFNO:

BANK CODE BRANCH CODE

ACCOUNT NUMBER:

CURRENT /SAVINGS ACCOUNT

ACCOUNT HOLDER TITLE/NAME: _____

[As It Appears On the Bank Statement]

Where some Amount of Money Constitutes an **Overpayment** to Me, I hereby give irrevocable Authority to My **Bank** to return the same to the **Teachers Service Commission (TSC)** Whether or not, I am in Service with the Commission, this Authority extends to any **Other Bank or Account** to which the said Money may be transferred.
This Request supersedes any Other Request given to this Date.

SIGNATURE: _____

National I/D. Card No: _____ **DATE:** _____

NB: Attach copies of; - Most recent pay slip, National I/D card, and proof of Bank Account e.g. Bank Card/Plate. Your bank form **MUST** be forwarded (signed and rubber stamped) by your head teacher.
*Delete inapplicable Offices