

Recommendation for Higher Degree Completion Form

Employee Details

- **Full Name:** _____
 - **Employee ID:** _____
 - **Department:** _____
 - **Designation:** _____
 - **Contact Number:** _____
 - **Email ID:** _____
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Higher Degree Details

- **Name of the Degree:** _____
 - **Institution Name:** _____
 - **Course Duration:** _____
 - **Mode of Study:** Full-Time Part-Time Online
 - **Expected Completion Date:** ____ / ____ / ____
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Justification & Benefits

- **How will this degree benefit your role at TC Business School?**

 - **Any special requests (e.g., leave, financial support, flexible hours):**

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Approval & Verification

- **Recommended By:** _____
- **Approval By:** _____
- **Approval Date:** ____ / ____ / ____
- **HR Verification:** Approved Rejected
- **Remarks (if any):**

Declaration I confirm that the information provided above is true and accurate. I understand that approval is subject to the policies of TC Business School.

Signature: _____

Date: ____ / ____ / ____

For Office Use Only

- **Processed By:** _____
 - **Final Decision Date:** ____ / ____ / ____
 - **Decision Reference Number:** _____
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