
APPLICATION FROM
(Xerox copies also can be used)

1. Name:
2. Age:
3. Qualification & specialization:
4. Experience:
5. Designation & official address:
6. Accommodation required : YES/NO
7. Address for communication:
8. Phone No:
9. E mail:

DECLARATION

The information provided is true to the best of my knowledge. If selected, I agree to abide by the rules and regulations of the course and shall attend the course for the entire duration. I also undertake the responsibility to inform the Coordinator in case I am unable to attend this course.

Place:

Date :

Signature of candidate

SPONSORSHIP

Dr./Mr./Ms. is an employee/student/research scholar of our institute and is here by sponsored to attend the course, if selected.

Office seal

Signature of the sponsoring authority