



Participation in seminar/national/regional/international

Name :
Full Address :
Telephone Number(land phone) :
Cell phone :
Educational Qualifications : B.A/B.Sc M.A/M.Sc M.Phil/Ph.D
(Please tick whatever is relevant)
Institutional Affiliation if any: :
Nature of registration : Resource Person Participant
Amount and mode of payment : Cheque Cash Bank Transfer
Signature of candidate :
Place :
Date :
Recommended By :

For Office use only:
Accepted or not

Director / Deputy Director