



ANNAMALAI UNIVERSITY

(Accredited with "A" Grade by NACC)
DEPARTMENT OF PHYSICS
ANNAMALAINAGAR

UGC, TNSCST, DST Sponsored National
WORKSHOP ON STUDENT PROJECT

23-08-2019 & 24-08-2019

Registration Form

Name:

Designation:

Institution /Organization:

(Please note that the above name, designation and Institution given by you will appear as such in your certificate)

Sex and Age in years:

Address:

Email:

Mobile/Phone:

Accommodation required: Yes / No

Payment Details

COPY ENCLOSED: Yes / No

DD / NEFT No:

Bank Name:

Date:

DECLARATION

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

Place

Date:

Signature of the Applicant