

GOVERNMENT ENGINEERING COLLEGE, THRISSUR

OPPURTUNITIES AND CHALLENGES IN CHANGE MANAGEMENT

27th November 2017 to 1st December 2017

REGISTRATION FORM

1. Name :
2. Date of Birth & Age :
3. Gender :
4. Designation :
5. Department :
6. Institution :
7. Type : Govt./Aided/Self financing
8. Address for communication :
9. Phone No. Office :
Mobile:
10. E-mail :
11. Experience (years) Industry:
Teaching:
12. Food preference : Veg/Non veg
13. Accommodation required : Yes/No

DECLARATION

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

Place:

Signature of applicant

Date:

SPONSORSHIP

Mr./Mrs./Dr.....is an employee of our institute/organization and is hereby sponsored for the above short term training programme. He/She will be permitted to attend the course, if selected.

Place:

Signature of sponsoring authority with seal

Date: