

# Registration Form

## TRAINING COURSE ON

**Course Title: SHP Plant Technicians in Service**

**Schedule: Mar. 12 - 21, 2012**

Name : .....Mr./Dr./Mrs./Ms.)

Position : .....

Company/Organisation: .....

Department/Division: .....

Mailing Address: .....

Tel (Off.): .....Residence: .....Mob: .....  
(with STD code) (with STD code)

Fax: .....E-mail:.....

Duties and Responsibilities: .....

Please describe briefly your professional experience in the course subject area on separate sheet.

Educational Background:

Degree	Year	Field of Study

Details of Fee: If applicable

DD No. .... Bank ,..... Amount Rs .....

**Date:**

**Signature**

*For further information and registration, please contact or write to:*

Head,

Alternate Hydro Energy Centre,

**Indian Institute of Technology Roorkee**

**Roorkee- 247 667 (Uttarakhand), India**

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