

Registration Form

Three Days Training Course on

HYDROLOGICAL INVESTGATIONS FOR CONSERVATION AND MANAGEMENT OF LAKES

1-3 March, 2011at NIH, Roorkee

Name: Mr/Mrs/Dr

Designation:

Organization:

Address:

.....

Telephone No.:

Mobile No.:

E-mail:

Fax No.:

Qualification:

Field of Specialization:.....

Is accommodation required?: Yes/No

(Signature of Candidate)

(Sig. & Seal of Sponsoring Authority)

(Note: Photocopy of the form can also be used)