Call for Nomination

**Application Form**

**Training Course on**

**Planning and Designing of Solar Powered Pumping Systems**

**Sustainable Solution for Drinking Water Supply**

**Focus on Planning, Designing, Quality Control and Installation**

***Jointly Organized by IPHE and Watsancad Solution***

***Venue : Bhopal (MP) INDIA***

***29th Sept. 2014 to 01st Oct. 2014***

***Fill the application form and send us at*** [***trg.wcs@gmail.com***](mailto:trg.wcs@gmail.com)***,*** [***cooldeeps76@yahoo.in***](mailto:cooldeeps76@yahoo.in)

***Or***

***Post us at : WatsanCAD Solution, 68, Amrapali Enclave ChunnaBhatti, Kolar Road, Bhopal – 462 016***

**Personal details**

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| **LAST NAME** | | | **FIRST NAME** | | | | **MIDDLE NAME** | |
|  | | |  | | | |  | |
| **SEX** | | | **BIRTH DATE** | | | | | |
| **Woman** | **Man** | |  | | | | | |
|  |  | |  | | | | | |
| **COUNTRY OF RESIDENCE** | | |  | | | | | |
| **CITY** | | |  | | | PINCODE | | |
| **STATE** | | |  | | |  | | |
| **MAIL ADDRESS** | | |  | | | | | |
| **E-MAIL** | | | 1) | | | 2) | | |
|  | | | **Country Code** | **Area Code** | | **Number** | | |
| **PHONE** | | |  |  | |  | | |
| **FAX** | | |  |  | |  | | |
| **MOBILE** | | |  |  | |  | | |
| **DOCUMENT OF IDENTIFICATION** | | | | | | | | |
| **Passport Details** | | **COUNTRY OF ISSUE** | | |  | | | |
| **PASSPORT NUMBER** | | | **Date of Issue** | | | **Date of Expire** |
|  | | |  | | |  |
| **LANGUAGES** | |  | | | | | | |
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**Occupation**

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| **JOB OR PROFESSION** |  |
| Professional or technical specialization |  |

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| **POSITION YOU HAVE IN THE PROJECT, INSTITUTION, COMPANY OR ORGANIZATION / DEPARTMENT YOU BELONG TO:** *(POSITION OR ASSIGNMENT NAME)* |
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| **NAME OF THE PARTICIPANT, PROJECT, INSTITUTION, COMPANY OR ORGANIZATION / DEPARTMENT** |
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| **NAME OF THE SPONSORING AGENCY, INSTITUTION, COMPANY OR ORGANIZATION / DEPARTMENT** |
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| **MAIN ACTIVITIES OF YOUR PROJECT, INSTITUTION, COMPANY OR ORGANIZATION / DEPARTMENT** |
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| **PROJECT, INSTITUTION, COMPANY OR ORGANIZATION / DEPARTMENT CONTACT INFORMATION** | | | |
| **STATE / COUNTRY** |  | | |
| **CITY** |  | | |
| **ADDRESS** |  | | |
| **EMAIL** | 1) | | 2) |
|  | **Country Code** | **Area Code** | **Number** |
| **PHONES** |  |  |  |
| **FAX** |  |  |  |
| **MOBILE** |  |  |  |

|  |  |
| --- | --- |
| Tick the Category | Category |
|  | Government / NGO/ Academic Institutions sponsored per participant Rs. 16854/- i/c service tax @12.36% |
|  | or Industry / Consulting firms sponsored per participant Rs. 20225/- i/c service tax @12.36% |
|  | or In-case of per participant other than India @ $565 i/c service tax @12.36% |

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| ***On receipt of the nominations, acceptance will be notified by e-mail & mobile and only there after participants are requested to send Course fees as per demand***  ***Payment may be made by Electronic Fund Transfer (EFT) to WATSANCAD SOLUTION –***  ***Bank Details are as under***   1. ***State Bank of Bikaner and Jaipur, Kolar Road, Bhopal – 462016, MP, INDIA*** 2. ***Account No. A/c No. 51032940551*** 3. ***IFSC code no. SBBJ0010850 –*** 4. ***MICR No: 462003003***   ***Mode of payment Transfer : RTGS / NEFT or through Bank Draft payable in favour of Watsancad Solution, Bhopal*** |