

One Week Training Program on Statistical Techniques for Business Analytics (STBA-2017)

22-26, December, 2017

Registration Form

1. *Name:

2. *Affiliation:

3. *Educational Qualification:

4. *Address for correspondence:

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5. Telephone: Office

*Mobile.....

6. *E-mail:

7. *Purpose: Teaching, Research, Industry Application, Others

(Specify if others).....

8. Accommodation Required (Y/N):.....

9. *Bank Draft Or Fund Transfer Details:

Draft Number:or UTR Number.....

Date of issue:

Amount Rs. Bank Name:

Branch Name:

Date: / / 2017

Place:

Signature of Participant

Note: Please sent the Filled Scan copy to following mailing address

tpstba@gmail.com