

Application Form

10 days workshop on Geospatial Techniques

Date: - 15th July to 25th July 2017

Passport Size
photograph

Personal Information

Full Name (In block letters) _____

Gender _____

Date of Birth _____

Nationality _____

Permanent Address _____

Correspondence Address _____

Email Address _____

Highest Academic Qualification _____

Employment Record (If currently employed)

Employer's Name _____

Designation _____

Address _____

Telephone No. _____

Experience

Please tick the following questions

I have followed extensive GIS training and work regularly with GIS software

Namely.....

I have only basic awareness of GIS

I have no experience with GIS software

Basic knowledge of computer

State why you wish to follow this training programme and how it will help you in future

The undersigned certifies that his/her statements made in answers to the questions are true and correct.

Place:-

Date:-

Signature of the Applicant

(Not required when submitted as word/pdf file)