Nomination Form (In CAPITAL LETTERS ONLY)

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Name of the Programme																												
Date o	of the	Progro	amme	:																								
Sponsoring Organization																												
Organization Address																												
Telepho	one N	Imbers	s (Or	g)																								
Fax																												
Email:	Org													_	-						-	_						
Fax																												
Are y	′ou/W	ill you	stay	in I	Host	tel?						If y	es,	plea	ise	mer	ntiol	n th	ne c	late	an	d t	ime					
Yes			No			Arrival			Date			Time			Departure			Date				Time						
								Arriva									Depurrure											
										Par	ticip	ants	s De	tail	S													
S.No Name (IN CAPITA			AL LETTERS)				Designation					Contact No.					Email											
					•					Ma	ode	of P	aym	ent														
DD			Dated									Drawn on (Bank)						For Rs.										

Details of payment (in Rupees)

Fees	Hostel Charges	Service Tax	Discount, if any	Any Other Deduction				

DD should be drawn in favour of Bureau of Indian Standards, Noida or New Delhi

Date:

Signature and Seal

The nomination(s) should reach the undersigned at least one week before the course date.

Scientist F & Head National Institute of Training for Standardization (NITS) Bureau of Indian Standards A-20&21, Institutional Area, Sector - 62, Noida 201 301 Phone: 0120-2402201/5 Telefax: 0120-2402202, 2402203 Email: <u>nits@bis.org.in</u>; <u>hnits@bis.org.in</u> Website: <u>http://www.bis.org.in/</u>