

NOMINATION FORM FOR TRAINING

Training Code: [CVSAAU – 02/2018-19]

1. Name of the Applicant:
2. Sex: Male/Female:
3. Designation:
4. Name of Organization/Department:
5. Category: Teacher /Researcher /Post Graduate Scholar:
6. Educational Qualifications:
7. Address for Communication:

8. Mobile No.
9. Fax No.
10. E-mail address:
11. Computer Related Experience:
12. Details of Training programme on Bioinformatics Attended, if Any:

13. Details of working experience, if any:

14. Do you require accommodation?

Signature of applicant

Nomination:

I do hereby nominate _____ for participating in the training programme on '**Biomolecular Interactions, Dynamics and Computer-Aided Drug**' organized by the BIF, CVSc, Khanapara from March 12–16, 2019.

Office seal

Signature of the Nominating Authority