REQUEST FOR PARTICIPATION

- Incomplete forms will be rejected.
- Attach all the relevant mark sheets / certificates.
- Letters of Reference should reach the organizers by post or email to **npde.atmp@gmail.com**

Participation requested for	: W	ORKSHOP on Control	llability of Heat and	Wave equations
Name	:			
Gender	:	Male Fe	emale	
Age	:			
Address for Correspondence	:			
Phone	:			
Email	:			
Highest Academic Qualification	:			
(with College/University)				
Current Position	:			
Research interest and experience	:			
Percentage / CPI :	:	Qualification	Year of Passing	Percentage
(Fill in the relevant columns)		Class X		
		Class XII		
		B. Sc. / B. Tech. / B. E.		
		M. Sc. / M. Tech.		
Workshop Attended Earlier	:			
Financial Support required for	:	Travel		
		Accommodation	l	