



REGISTRATION FORM

“Capacity Building Training Programme for Teachers in Social Science and Related Disciplines” August 12 - 25, 2013

Name: _____

(IN CAPITALS)

Age _____ Gender: Male/Female

Designation _____ Discipline: _____

Department: _____

University / College: _____

Academic Qualification: _____

Correspondence Address: _____

Mobile: _____ Email: _____

Area of Specialization: _____

Teaching Experience: (in years): _____

Research Experience: (in years): _____

No. of Research Publications: _____

No. of Conferences Attended: _____

Have you attended any Training Programme on Research Methodology?

If Yes, give details: _____

Any related information: _____

(Note: Last date for submitting the application: 5th August 2013 Email: gugcbp2013@gmail.com)

Signature of the Applicant

Date:

**Recommendation from
the Head of the Dept/ Principal of the College.(Seal)**