

REGISTRATION FORM FOR QIP SPONSORED CANDIDATES
Short -Course on Supply Chain Management
September 30- October 5, 2007
Venue: Indian Institute of Technology Kanpur

Name _____

Designation _____

Organization _____

Address _____

City _____

Pin _____ **Phone** _____

Email _____

Teaching and Research Interests _____

Education Background

	Degree	Year	Institute
UG			
Graduate			

Work Experience

Organization	Duration (in years)	Brief Profile

Demand Draft Details

Draft No. _____ **Issuing Bank** _____

Date _____

Signature _____

Sponsored by:

Name _____ **Designation** _____

Signature of Head of the Institute/Organization with seal