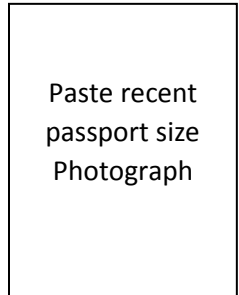


# Registration Form

1. Name:
2. Sex: Age in years:
3. Address (Including mobile and email id):
4. Nationality:
5. Academic Qualification:
6. Specific Research area/topic (if any):
7. Status (Research Scholar/ Faculty):
8. Institutional Affiliation:
9. Earlier exposure to RS/GIS: Yes/No
10. Do you need accommodation (On payment basis): Yes/No
11. Name and contact number of a person who can be contacted in case of emergency:
12. Please explain in 750-1,000 words how this workshop will help you in your professional career. **(Use separate sheet )**
13. Write up must be enclosed along with the Registration Form.
14. Attach scanned copy of bonafide certificate/NOC issued by institutional head.
15. Scanned Copy of duly filled Registration Form should be sent on the following email  
[workshopmmvbhu@gmail.com](mailto:workshopmmvbhu@gmail.com)



Signature with seal

Signature of the candidate

Head of the institution/Supervisor:

Date:

## Note

- ***The participant should come with his own laptop and dongle.***
- **Original registration form will be submitted at the time of registration.**