



ICSSR SPONSORED

**Capacity Building Programme on Social Reality, Research and Development for Young
Social Science Faculty**

Organized by

Department of Political Science, Faculty of Social Sciences, BHU

Registration Form



Name (in block letters).....

Father/Mother's Name.....

Category (ST/SC/OBC/Woman)..... **Date of Birth:**.....

Date of Joining:.....

Designation.....

Name of the University/Institute/Organization:.....

Name of the Department:.....

Address:.....

Email ID:..... **Mobile no:**.....

Accommodation required (Yes/No).....

Place:.....**Date:**.....

Principal/Head

Signature of the Participant