Batch Preference: _____

PHOTOGRAPH

HAFFKINE INSTITUTE FOR TRAINING, RESEARCH AND TESTING
A.D.MARG, PAREL, MUMBAI-400 012

APPLICATION FORM FOR ANNUAL BIOTECHNOLOGY TRAINING PROGRAMME
2010

STUDENT DETAILS:
[KINDLY FILL IN BLOCK LETTERS]

NAME: _____
SURNAME FIRST NAME

COLLEGE: _____

COLLEGE ADDRESS: _____

CLASS: _____ SEX: _____ DOB: _____

RESIDENTIAL ADDRESS: _____

_____

PHONE NO: _____ MOBILE NO:_____

E-MAIL ID: _____

SIGNATURE OF STUDENT FEE RECIPT NO: _____

FOR OFFICE USE

BATCH ALLOTED: _____

To,
The Accounts Section
Please accept the sum of Rs. 2,000/- (Rupees Two Thousand Only/-) as fees for the Annual Biotechnology Training Programme-2010.

Dr. Abhay Chowdhary
Director, Haffkine Institute.