



FACULTY DEVELOPMENT PROGRAMME
ON
Paradigm Shift in Teaching Pedagogy due to COVID-19
21st ~ 28th June, 2021
Lyallpur Khalsa College Technical Campus
Jalandhar, Punjab-144001

Registration Form

1. Name: _____
2. Designation: _____ 3. Institution: _____
4. Address for Correspondence: _____
5. Phone: _____ 6. Email: _____
7. Highest qualification: _____ 8. Total Experience (in years): _____
9. Area of Research/Interest: _____
10. Payment Details: DD/Cash/IMPS/NEFT _____
DD/IMPS/NEFT No: _____ Date of Payment: _____
11. Accommodation required: YES/NO _____

DECLARATION BY THE CANDIDATE

The given information is true to the best of my knowledge. I agree to abide by the rules and regulations of the programme. If selected I shall attend the programme for the entire duration. If I am unable to attend the programme, I am prepared to forgo the registration paid by me.

Place:

Date:

Signature of the candidate