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| D:\CUJU\others\logo.jpg | **National Workshop on**  **Intellectual Property Rights : Implementation and Enforcement**  **14th – 15th , January 2016** |

**Registration Form**

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| **S. No.** | **Particulars** | **Details** |
| **1.** | **Name of the Participant** |  |
| **2.** | **Sex** |  |
| **3.** | **Category** | Academic/Industry |
| Gen/ST /SC /OBC /PH /Minority |
| **4.** | **Department** |  |
| **5.** | **University/Organisation** |  |
| **6.** | **Mailing Address**  (only departmental address required) |  |
| **7.** | **Mobile No.** |  |
| **8.** | **E-mail** |  |
| **9.** | **Accommodation** | **Yes/No** |
| **Signature of the Applicant** | | |

**Undertaking by Concerned Authority**

This is to certify that (Mr/Ms) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_in the Department of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I have no objection to permit him/her for the 2 day aforesaid National Workshop at Central University of Jammu.

**(Sign & Seal)**