## NOMINATION FORM FOR TRAINING

**Training Code:** [SBTHub – 2017-18/02]

1. Na	ame of the applicant:
2. Se	x: Male/Female:
3. De	esignation:
4. Na	ame of organization/department:
5. Category: Teacher/Researcher/Post-graduate scholar	
6. Ad	ldress for communication:
7. Te	lephone No.
8. Fa	x No.
9. E-	mail address:
10.	Have you attended similar training earlier?
If	yes, furnish details:
11.	Details of working experience:
12.	Do you require accommodation?
	Signature of applicant
Nominat	cion:
I do hereby nominatefor participating in the training programme on "Animal Cell Culture and Molecular Typing of Microbes" organized by the State Biotech Hub (Assam), College of Veterinary Science, A.A.U., Khanapara, Guwahati from February 12 <sup>th</sup> to 16 <sup>th</sup> , 2018.	
Office se	Signature of the nominating authority