Registration Form

SHORT TERM COURSE ON SMALL HYDROPOWER DEVE (Mar 20 - 24, 2017)	ELOPMENT		
Name: (Write in block letters)	(M	r./Dr./Mrs./Ms.)	РНОТО
Father's / Husband Name:			
Date of Birth:	(DI	D/MM/YYYY)	
Position:			
Company / Organization:			
Department / Division			
Mailing Address:			
Tel (Off.): Residence: (With STD code) (With ST			
Fax:	E-mail:		
Duties and Responsibilities:			
Please describe briefly your profesheet.	ssional experience	in the course	subject area on separate
Educational Background:			
Degree	Year	Fie	ld of Study

Date: Signature

For further information and registration, please contact or write to:

Head,

Alternate Hydro Energy Centre, Indian Institute of Technology Roorkee Roorkee- 247 667 (Uttarakhand), India

Phone : +91-1332 274254, 285213 Fax : +91-1332 273517, 273560

E-mail : ahec@iitr.ac.in, aheciitr@gmail.com

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