Appendix-II Form to Conduct Workshop

(for hosting Commission's Training programmes/Orientation programmes/Workshops/Seminars/Conferences)

1. Institution

Name _____

		Phone Fax/Email		
2. Head of	the Institution	Name	Mob-	
Type of r	orogramme:	Contact Ph.	IVIOD	
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· · · · · · · · · · · · · · · · · · ·	he programme	termes)		
	ges 80-93 of the Guid	elines)		
× •	icture available:	cinics <i>j</i>		
Auditoriu		Yes/No	If yes, strength	
Meeting 1		Yes/No		
U	ce Room:	Yes/No	If yes, strength	
		Yes/No	If yes, strength	
Audio Sy				
	cing System	Yes/No		
	l Projector	Yes/No		
•	jector/with power	Yes/No		
	sentation Facility			
	Exhibition	Yes/No		
5. Local Co		Name		
(Refer pa	ge 80-93of the Guide	lines)		
		Phone		
		Fax/Email		

7. List of Resource PersonsList of Resource Persons may be enclosed in the following

SI. No.	Name	Official Address	Residential Address	Contact Nos.	Email

8. List of Participants: List of Participants may be enclosed in the following format

Categor y	SI. No.	Name	Official Address	Residential Address	Contact Nos.	Email

Separate lists of participants may be provided for different categories like the participants from host institution/local institutions/ State/ other States as per the Pages 80-93 of the Guidelines.

1. **Programme Schedule:** A Programme Schedule containing the details of the sessions and the topics to be covered in each of the sessions may be enclosed.

Signature (for the host Institution)