

Department of Studies in Economics and Co-operation

University Of Mysore, Mysore

***Registration Form***

**“SIX DAYS NATIONAL LEVEL WORKSHOP ON BASIC ECONOMETRICS”**

**6 – 11February, 2015**

Name:…………………………………………………………………………………..

Designation:……………………………………………………………………………

Institute/ Organisation:…………………………………………………………………

Address for Communication:…………………………………………………………..

………………………………………………………………………………………….

Phone: ………………………………………………………………………………….

Email:……………………………………………………………………………………

Registering as: Faculty Member ( ) / Research Scholar ( ) / Others ( )

Registration Fees:………………………………………………………………………….

DD Details:

(DD should be sent in the Name of **Chairman, DOS in Economics & Cooperation, Manasagangothri, Mysore – 570006 payable at Mysore**)

Amount: Rs……………..DD No…………………….Date:……………………………..

Name of Bank:…………………………………… Branch………………………………

Accommodation Required: Yes [ ] No [ ]

If Yes, please contact Coordinator of National Workshop

Place: ……………….. Date:…………………

Signature of Participant Signature of Guide/ Chairperson/ Principal