<b>REGISTRATION PROFORM</b>	A DECLARATION BY THE APPLICANT	T.M.A.E SOCIETY , HARAPANAHALLI
One Week online STTP on "IT SKILLS" For All Branch Lecturers From: 05/07/2021 to 09/07/2021	" I shall abide by the rules and regulations of staff development STTP. The information provided by me is true to the best of my knowledge. If selected I shall attend the course for the entire duration.	T.M.A.E'S POLYTECHNIC
Name :	Place:	(Govt Aided) Ballari Road, HOSAPETE-583201
Designation:: Gender:	Date: Signature of the applicant	ISTE Approved
Branch:	PERMISSION	SELF FINANCING ONE WEEK ONLINE SHORT TERM
Institution name with code:	Mr/Mrs is	TRAINING PROGRAMME ON "IT SKILLS"
Employee No:	regular employee of our institute. He/She will be relieved and permitted to attend the course if selected.	For All Branch Lecturers
ISTE Membership No:	Place :	From:05/07/2021 to 09/07/2021
Aadhar No:	Date :	
Address::	Signature of the Principal	Organized by
	FOR OFFICE USE ONLY	Department of Electronics & Communication Engineering
	Mr/Mrshas been selected /not selected for one week online STTP	T.M.A.E'S Polytechnic (Govt Aided)
Phone/Mobile No:	Remark:	Ballari road HOSAPETE-583201
Email ID:		
Date:	Place:	For details contact: Coordinator: N.Mahesh Kumar : 9902067909
Place:	Date:	<b>Co – coordinator</b> : G.Chandrashekar :9448261939
Signature of the Cand	idate Signature of Principal	
Online payment Ref id/UTR No.:		Note: For registration ISTE life membership is compulsory.
Paid Date:		France 7.