

7. Relevant Training Received, if any (Use extra sheet, if needed)

Sr. No.	Name of Organization/	Period

8. Please narrate briefly how this programme will benefit you in your work area?

9. Source of information about the programme: (Please tick/Write)

Pamphlets/ Brochures: Newspaper Advertisement: Others: _____

10. Payment made through Cash/ Demand Draft/ Pay Order: No. _____ Drawn on (Bank Name) _____ Dated: _____ Amount: Rs. _____

Place:

Candidate's Signature

11. Name of the Officer authorized to nominate _____

Designation _____

Date:

Seal and Signature

Note: The filled-in application form may be address to:

Dr. Ganapati B Sinnoor, Programme Coordinator, Department of Business Studies, School of Business Studies, Central University of Karnataka, Aland Road, Kadaganchi, Dist. Kalaburagi (Karnataka) Teli: 08477-226702/226703, Mobile: +91 9731046434, 9449066734, E-mail: ganapatisinnoor@cuk.ac.in, ganapati100@gmail.com,

For office use only	
Receipt No.	Date:

