

Application for Five-Day National Workshop

On

"MEMS Engineered Medicine": Breaking Barriers in Medical Diagnostics (12 to 16 April-2019)

Organized by

Department of Electronics Communication Engineering NIT Silchar

| 1. | Name |
|----|---|
| 2. | Institute/University Name |
| 3. | Designation |
| 4. | Address |
| | |
| 5. | Phone/Mobile |
| 6. | Email |
| 7. | Qualification |
| 8. | DD Number |
| 9. | Accommodation Required: Yes/no |
| | |
| | |
| | Declaration by Applicant |
| | The information Furnished in the application is true to best of my knowledge. |
| | |
| | Date: |
| | Signature: Forwarded By HOD |