Nomination Form

Name of the Programme: National Level Training Programme on “Geo-meteorological Hazards Risk Management”

Date & Venue: 10th – 14th February 2020 at Delhi Technological University, Shahbad Daulatpur, Main Bawana Road, New Delhi – 110 042

Name of the Nominee: ____________________________________________

Designation: ____________________ Age: ______________________________

Name and Address of the Organisation: ____________________________________________

______________________________________________________________________________

Residential Address: _________________________________________________________

______________________________________________________________________________

Telephone: STD Code: ____________________

Office: ______________ Residence: ______________ Fax: ______________

Mobile: ______________ Email: ______________________________________________

Expectation from the Course:

______________________________________________________________________________

______________________________________________________________________________

In what way do you think that this training workshop will be useful?

______________________________________________________________________________

______________________________________________________________________________

Accommodation requirement during training workshop

(Required/Not required) __________

Date: ______________

Name, Designation and Signature of the Nominating Authority

(Please fill all the details in Nomination form for NIDM data base record)