

**REGISTRATION FORM**

**AICTE sponsored National Seminar  
On  
“Recent Advances in Pharmaceutical Sciences”  
14<sup>th</sup> November 2008**

1. Name of the Candidate :  
2. Qualification :  
3. Designation :  
4. Address for Communication :

5. Phone No. with STD Code :

6. E-Mail (Compulsory) :

7. Registration Fee Rs. ----- D.D. No. -----, Date -----,  
Name of the Bank & Branch -----.

Signature of the Candidate

**Certificate of Recommendation from the Head of the Institution**

I hereby certify that Dr. /Mr./Ms. .... is interested in attending the AICTE sponsored one day national seminar on **“Recent Advances in Pharmaceutical Sciences” organized by The Erode College of Pharmacy, Erode on 14<sup>th</sup> November 2008.** He/ She will be permitted to participate in the above seminar. I also certify that to the best of my knowledge the information given above is correct.

Date:

Head of the Institution

Place

**Filled in application forms should be send to the E-mail: [ecperode@gmail.com](mailto:ecperode@gmail.com)**