

ENTREPRENEURSHIP DEVELOPMENT INSTITUTE OF INDIA
AHMEDABAD

NATIONAL FACULTY DEVELOPMENT PROGRAMME IN ENTREPRENEURSHIP
(20th January 2020 – 01st February 2020)

(Please affix
your recent
Passport Size
Photograph)

1. Name: _____
(First Name) (Middle Name) (Surname)

2. Date of Birth: _____ Age : _____

3. Designation: _____

4. Nominating Institution with Postal Address:

5. Phone: _____ & Fax: _____

6. Mobile No: _____

7. E-Mail id: _____

8. Work Experience (Use Extra Sheet if needed)

Sl. No:	Name of Organization	Period		Position Held
		From	To	

9. Relevant Training Received, if any (Use Extra Sheet if needed)

Sl. No:	Name of Organization	Name of the Institute	Period

10. Please narrate briefly how this Programme will benefit you in your area of work?

11. Payment made through NEFT/Cash/Demand Draft/Online transaction /Pay Order No:

_____ Drawn on (Bank Name) _____

dated _____ Amount _____

Place:

Candidates Signature

12. Name of the Officer authorized to nominate the candidate: _____

(Principal/ Head of the Institution)

Designation: _____

Date:

Signature

Note: Please mail the Nomination form with Demand Draft of Rs. 5000/- (all including GST) drawn in favour of "Entrepreneurship Development Institute of India, Ahmedabad". The filled in nomination form may be sent to:

<p>Mr. Shibin Mohamed Programme Director Entrepreneurship Development Institute of India KILA Campus, Mulamkunnathkavu, Thrissur, Kerala, India – 680581 Mob: 9995023319 E-mail: shibin@ediindia.org srok@ediindia.org</p>	<p>Dr. Chitra Srinivasan Associate Professor and Head Department of Commerce Faculty of Science and Humanities SRM Institute of Science and Technology SRM Nagar, Kattankulathur - 603 203 Kancheepuram District, Tamil Nadu. Mob: 9840514333 E-mail: hod.com.ktr@srmist.edu.in merxmercis@srmist.edu.in</p>
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