

NOMINATION FORM

AWARENESS TRAINING PROGRAMME ON GENERAL REQUIREMENTS FOR PROFICIENCY TESTING AS PER ISO/IEC 17043:2010

**8th -9th Jan'18,
New Delhi**

Venue: GLOBAL PT PROVIDER PVT. LTD
E 44/12, OKHLA INDUSTRIAL AREA, PHASE II,
NEW DELHI- 110020
MOB NO.- 09873001545, 09582999061

NOMINATION FORM

Please complete and return this form **on or before 5th Jan'18** by email or fax* to:

Ms. Farhat Siddiqui
PT Coodordinator
GLOBAL PT PROVIDER PVT. LTD
E 44/12 OKHLA INDUSTRIAL AREA, PHASE II,
NEW DELHI- 110020
MOB NO.- 09873001545, 09582999061
E-mail: care@globalptprovider.com

**Sending by email is preferable. Please print clearly if sending by fax*

A. PERSONAL PARITCULARS

Name of Participant (in Block Letters)	:			
Qualifications	:			
Position/Designation	:			
Organization				
Address for Communication	:			
City		Postal Code		
State		Telephone (O)		
Mobile		Fax		
E-mail				

Please note that since seats are limited, nominations will be registered on first come first basis.

Signature of the Participant

Name of Sponsoring Organization	:			
Address for Communication	:			
City		Postal Code		
State		Telephone (O)		
Mobile		Fax		
E-mail				
DD/Cheque No.				
Dated		Rs.		

Date:

Signature of the Sponsor with stamp of Organization