

Name of the College : - _____

Address of the College: - _____

College Email/Website:-

Details of Online Payments:

Transaction Id. _____

Bank _____

Date _____

Accommodation : Required / not required

1.	Name of the Speaker 1		Photo
	Year		
	Address		
	Contact No.		
2.	Name of the Speaker 2		Photo
	Year		
	Address		
	Contact No.		

3.	Name of the Researcher		Photo
	Year		
	Address		
	Contact No. & E-mail		

**Signature and Seal of the
Principal / Head of the Institution**