Registration form for Three-day Workshop on Digital Libraries : Open Source Software for digital repositories

8th -10th March 2018

Affix photo here

Name	
Gender	Male ☐ Female ☐
Designation	
Institute/Organisation	
Address	
City & State	
PIN	
Mobile Number	
E-mail ID	
Whether accommodation is required?	Yes ☐ No ☐
In not more than 100 words, kindly state the reasons on why are you interested to attend the workshop.	

Declaration

•I hereby declare that the information provided above is true to the best of my knowledge. Any deviation (whenever found) from the information provided is solely my responsibility, for which I may be penalized by appropriate authorities.

Signature