DELHI UNIVERSITY COMPUTER CENTRE
UNIVERSITY OF DELHI
DELHI-110 007

Proforma for applying for the training program

(Pease see the course detail and prerequisite for the course you want to attend at: http://www.du.ac.in/ducc/training.htm before filling this form.)

Course Name:_____

Date of commencement: _____

(Prof. /Dr. / Miss / Mrs. / Mr.)

Full Name: _____
(In Block letters)

Department / College: _____

Please tick one:

Teacher / Non Teaching Staff / Research Scholar / PG student
_____

Telephone: Home_____ Mobile _____

E- Mail Address: _____

Previous Computer
Experience: _____

_____

(Signature of Applicant)

Signature of HOD / Principal of the College
       (With proper Seal)

                   Dated: _____

Note: A participant can apply maximum for two courses in a session on separate application forms. If a selected participant fails to join a course he will be not allowed to participate in any other course in this session.