



ADMINISTRATIVE STAFF COLLEGE OF INDIA

Bella Vista, Raj Bhavan Road, Hyderabad - 500 082, A.P. (India)

Nomination Form

International Certification Programme Change Management for Achieving Continuous Water Supply (24x7) for All in Urban Areas in India (7-14 September 2017)

Affix your
photograph
here

Nominee's Contact Information :

Name (Mr/Ms):	_____	Date of Birth :	_____
Designation :	_____	Qualification :	_____
Organisation :	_____		
Address :	_____		
Phone(s) :	(Off) : _____	(Mobile) :	_____
		Home :	_____
e-mail :	_____	Fax :	_____

Sponsor's Details

Name of the Sponsoring Authority	_____	Designation	_____
Organisation :	_____		
Address :	_____		
		Pincode :	_____
Phone(s) :	(Off) : _____	(Mobile) :	_____
e-mail :	_____	Fax :	_____

Fee Particulars

Amount Payable :		Mode of Payment (DD/Chq/NEFT) :	
Name of the Bank :		Date of Instrument/Transfer :	
Instrument Number :		UTR Number for NEFT :	

Medical Insurance

Name of the Insurance Agency	Policy Number	Validity upto

Note : Coverage should be available in Hyderabad, India

Signature of the Sponsoring Authority :

NOTE : Forward nomination form to : **Ms. V. Naga Swapna, Programmes Officer**, Administrative Staff College of India, Bella Vista, Hyderabad-500 082. Phone : 0091-40-66534247, 66533000, Mobile: 9246203535, Telefax: 0091-040-23324365, Fax : 0091-40-66534356, e-mail: poffice@asci.org.in