

REGISTRATION FORM FOR M.SC /B.SC PROJECT WORK 2007 – 08

Name Of The Student	
Gender	Male [] Female []
Name Of The Institution / University	
Course Attending:	
Duration Of The Project Work	
Subject Area Of The Project Work	
Accommodation Required?	Yes [] No []
Residential Address With Pin code	
Phone Numbers	Land Line
	Mobile
Name And Signature Of The Head Of The Department	
Recommendation From The Principal	

QAS - INDIA
(SINCE-1994)