

**REGISTRATION FORM  
MANAGEMENT DEVELOPMENT PROGRAM on  
“ENHANCE YOUR RESEARCH ACUMEN”  
June 12-13, 2018  
GLOBSYN BUSINESS SCHOOL, AMTALA**

Name:

Designation:

Office Address:

Phone/Mobile:

Email:

Date of Birth:

Highest academic qualification:

Requirement of accommodation: YES/NO

**PAYMENT DETAILS:**

Draft No.....dt..... amounting  
Rs. .... drawn in favour of GLOBSYN KNOWLEDGE  
FOUNDATION, payable at Kolkata.

OR

NEFT Transaction No: .....dt.....  
for Rs.....  
through.....Bank

Recommendation and forwarding from the organization where working  
(Optional)

Date:

Place:

Signature of the Applicant