

# REGISTRATION FORM

No.:



SUN, 1<sup>st</sup> OCT 2023  
(10 am to 5 pm)

**Office Premises, Putalisadak**

Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

Last Qualification: \_\_\_\_\_ GPA / %: \_\_\_\_\_

IELTS / PTE \_\_\_\_\_ Score: \_\_\_\_\_

Interested Course: \_\_\_\_\_

## Institutions:

- Counselling Table No. 1
- Counselling Table No. 2
- Counselling Table No. 3
- Counselling Table No. 4
- Counselling Table No. 5

- Counselling Table No. 6
- Counselling Table No. 7
- Counselling Table No. 8
- Counselling Table No. 9
- Counselling Table No. 10

- Counselling Table No. 11
- Counselling Table No. 12
- Counselling Table No. 13
- Counselling Table No. 14
- Counselling Table No. 15

Only for Official use

Remarks 1 :

Remarks 2 :

Remarks 3 :