



**Dr. Babasaheb Ambedkar Marathwada University,  
Aurangabad-431 004 Maharashtra (India)**

Re-accredited with Grade 'A'



REGISTRATION FORM



(Photograph of the participant)

1. Name of the Participant : \_\_\_\_\_
2. Date of Birth : \_\_\_\_\_
3. UG\PG\PPG\TEACHER : \_\_\_\_\_
4. Discipline : \_\_\_\_\_
5. Name of the College : \_\_\_\_\_
6. Registration Code : \_\_\_\_\_

Signature

Participant

Signature

Principal/Head of the department

Signature

District/University Department Coordinator