



Registration Form for Participants

Name _____ :

Address _____ :

Name of the
Organization & Designation: _____

Course to register for: (please tick)

1. IT Security
2. Managing Projects Using PMI techniques
3. Project Management (PMP)
4. ITIL v3 foundation
5. Managing Data Effectively using Microsoft Excel

Contact no _____ : Office _____
Residence _____
Cell _____

Email id _____ :

Got reference from _____ :

Are you interested in any other programs?

Payment Details

I hereby enclose Cheque _____
Dated _____
Drawn on (Name of the Bank) _____
for USD/ TSH _____.

Payments should be made in favor of “**University Computing Centre Ltd**”.