



ENROLLMENT FORM

Centre Head – AEAMT
Central Manufacturing Technology Institute
Tumkur Road
Bangalore 560 022

Fax : 080 – 2337 0428
Email: training@cmti.res.in
Mob: 0944984 2686
0944984 2678

Course code			
Title of the Training Programme			
Commencing Date			
Sl No.	Name of the participant (in block letters)	Designation	Contact No
1			
2			
3			
4			
Organisation Name			
GST No.			
Address (for correspondence)			
Contact person Name			
Designation			
Phone / Mob			
Email			
Fax			
Payment Details : (made through online NEFT /RTGS/IMPS)			

Enclosed Cheque / DD No. _____ dated _____

For ₹ _____ drawn on (Bank) _____

in favour of **Central Manufacturing Technology Institute, Payable at Bangalore.**

Date:

Seal & Signature of the sponsoring Authority

Please Mail / Fax the completed form immediately for the address mentioned above