

Staff Development Programme  
(Sponsored by AICTE)  
**Practical approach to Biomedical Instrumentation**  
11 – 23 January 2010  
Organised by  
Department of Medical Electronics – MSRIT  
[www.msrit.edu](http://www.msrit.edu) E-mail: [drbrao@msrit.edu](mailto:drbrao@msrit.edu)

**REGISTRATION FORM**

Name: ..... Designation: .....

Age & Sex: ..... Qualification: .....

Year(s) of Experience: Teaching..... Industry..... R&D.....

Area(s) of Research Interest: .....

Department: .....

Name of the Institution: .....

Address for communication: .....

E-mail id:

Ph. No. with STD Code: off: ..... Res: ..... Mobile: .....

Accommodation Required:  Yes Check in Date /Time.....

Check out Date /Time.....

No

Purpose for Participation: .....

Additional information (if any)

Date:

Place:

Signature of the Applicant

Signature & Seal of Principal

For office use only

Registration No:

Date:

Accepted:

Rejected:

Wait List:

Note: Photo copies of Registration form may be used  
**Last Date for registration – 31<sup>st</sup> December 2009**

## DECLARATION

The information furnished in the application form is true to the best of my knowledge. I agree to abide by the rules and regulations governing the course. If selected, I shall attend the course for the entire duration. I also undertake the responsibility to inform the coordinator sufficiently in advance, in case I am unable to attend the course.

**Date:**

**Place:**

Signature of the Applicant

## SPONSORSHIP CERTIFICATE (for industry/other participants)

It is certified that Dr./Mr./Ms.....is an employee of our organisation/institute and is hereby sponsored for the SDP on **Practical Approach to Biomedical Instrumentation** at M. S. Ramaiah Institute of Technology, Bangalore during the period 11-23 January 2010. He/ She will be permitted to attend the course if selected.

DD/Cheque No.: .....

Dated:.....

Name of the Bank: .....

Place:

Date:

Signature of the sponsoring  
Authority (with Seal)

### ADDRESS FOR CORRESPONDENCE

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