

## National Workshop on Network Modelling and Graph Theory Dec 14-16, 2017 Department of Mathematics Dibrugarh University



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Please complete the information below, note that the n	ame and title you give here will be printed on the certificate.
Date:	Place:
1. Participant's information	
☐ Mr . ☐ Ms. ☐ Dr . ☐ Prof.	
Name:	
Position:	Department:
Organisation/University/college:	
Address:	
Zip code:City:	Country:
Phone:	Fax:
Email :( For further communication)	
2. Workshop Fee: Rs. 500* (Fee includes tea/	coffee, lunch, and workshop materials during the workshop.)
Detail of Payment:	
3. Are you going to present a paper? (if yes) Title:	□Yes □No
4. What is your expectation from this works	hop?
Signature of the Participant:	

\*The registration fee may be deposited online to A/C no. 50100167233494, A/C Holder name: Ankur Bharali, IFSC: HDFC0000753.

P.S. Please send a scanned copy of this form to a.bharali@dibru.ac.in (Seats are limited)