



Batch: 2018 (1)

Registration Form

Participant's Type

- Student
- Professional

Photo

Basic Information

Name (in block letters) :

Mother's Name :

Father's Name :

Date of Birth :

Mailing Address :

Email Address (in block letters) :

Contact No. :

Academic Background

Highest Academic Degree Awarded :
 (with subject and institution)

Computer Knowledge Level : Good Moderate Nil

During Bachelor and/or Master's Degree

Studied Any Mathematics Course? : Yes No

Studied Any Statistics Course? : Yes No

Reasons for Joining the Program :

Signature of Coordinator

Signature of Participant