

**REGISTRATION FORM FOR SHORT COURSE ON EMBEDDED SYSTEM DESIGN**

1. Name of the applicant : \_\_\_\_\_
2. Designation : \_\_\_\_\_
3. Department : \_\_\_\_\_
4. Institute/ Organization : \_\_\_\_\_
5. Academic Qualification : \_\_\_\_\_
5. Address for correspondence : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Nature of Job : \_\_\_\_\_
7. Phone No. \_\_\_\_\_ E mail: \_\_\_\_\_
8. \* Accommodation required (Y/N): \_\_\_\_\_
9. Demand Draft details: (In favour of Director, PEC University of Technology, Chandigarh.)  
Draft No. \_\_\_\_\_ Bank \_\_\_\_\_  
Amount \_\_\_\_\_ Date \_\_\_\_\_

**Signature of applicant**

Recommendation from Head of Institute (Needed for faculty only)

The applicant is a bonafide faculty in my Institution. I recommend his/her participation in the course.

**(Signature /Seal)**

\* as per actual basis.

Please return the duly filled form by post or by hand to Course Coordinator  
Department of Electronics & Electrical Communication.  
PEC University of Technology, Chandigarh  
Sector -12. Chandigarh (UT).  
For any other details please contact:-  
Neelu Jain, Course Coordinator,  
E-mail: [neelujn@hotmail.com](mailto:neelujn@hotmail.com). Ph. 0172-2753760, Mob: 9888014575