



**RESEARCH METHODOLOGY WORKSHOP IN SCIENCE**

**RSMWS-BU-2019; 22-24<sup>th</sup> December**

**<WORLD BANK FUNDED> <OHEPEE>**

**(ODISHA HIGHER EDUCATION PROGRAM FOR EXCELLENCE AND EQUITY)**

**BERHAMPUR UNIVERSITY, ODISHA, INDIA**



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Passport Photo  
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<b>1. Name: (capital letter) :</b>
<b>Designation:</b>
<b>2. Gender: Male/Female</b>
<b>3. Name of University/College</b>
<b>4. Name of the Department</b>
<b>5. Name of Your PhD Supervisor if Allotted</b>
<b>6. PhD Registration Number if Any</b>
<b>7. Date of PhD Enrolment (Attach Evidence)</b>
<b>8. Contact E-mail:</b> <b>Mobile No:</b>
<b>9. Whether accommodation is needed?</b>
<b>10. Food Habit: Veg/Non-Veg:</b>
<b>11. Registration fee: Rs-100/- (On Cash )</b>

I hereby declare that, The above data's are correct to my knowledge and I would join the *Research Methodology Workshop in Science Course* from 22/12/2019 to 24/12/2019. I will obey all the rules and regulation as per the instruction of OHEEPE.

Kindly fill up the Details as per the Format and deposit the form to **Prof. M. Jena , Dept. of Botany**, Berhampur University in Hand, form on/before 15<sup>th</sup> December 2019 Positively

Signature of Participant

Date:

Place:

(Signature of Head/Coordinator of the Department)