

**DAE - BRNS
NATIONAL LASER SYMPOSIUM
(NLS - 2003)**

DECEMBER 22-24, 2003

Intimation of Participation

_ (Please strike out whatever is not applicable)

Name (in capital)

(Last name)

(First Name/Initials)

Designation:

Sex:

Registration Fee Category:

Address

Pin Code

Tel:

Fax

E-mail:

Proposed Contribution:

Financial Assistance*

*Can be provided to very limited number of deserving students only, for whom the sponsoring institution is unable to pay. Please attach recommendation letter from your guide.

Accommodation:

Accommodation required from _____ to _____

My expectation / entitlement is up to Rs _____ per day.

(Unless this column is filled it will not be possible to arrange the accommodation)

Date.....Signature.....

Please get this form Xeroxed for additional copies.

Kindly mail this form along with DD
on or before: October 31, 2003 to

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