



7. Relevant Training Received, if any (Use extra sheet, if needed)

Sr. No.	Name of Organization	Name of the Institute	Period

8. Please narrate briefly how this programme will benefit you in your work area?

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9. Source of information about the programme: (Please tick/write)

Pamphlets/Brochure  Newspaper  Others \_\_\_\_\_

10. Payment made through Cash/ Demand Draft/ Pay Order: No. \_\_\_\_\_

Drawn on (Bank Name) \_\_\_\_\_

Dated: \_\_\_\_\_ Amount: Rs. \_\_\_\_\_

Place:

Candidate's Signature

11. Name of the Officer authorized to nominate \_\_\_\_\_

Designation \_\_\_\_\_

Date:

Signature

*Note:*

Please mail the Nomination Form with Cash/Demand Draft/at par cheque (@Rs 11000/- (plus 18% GST) for non-residential participants and Rs 22000 (plus 18% GST) for residential participants drawn in favour of 'Entrepreneurship Development Institute of India, Ahmedabad. The filled-in nomination form may be address to:

***Dr. Pankaj Bharti***

Programme Director

Entrepreneurship Development Institute of India

P.O. Bhat – 382 428 , Dist. Gandhinagar (Gujarat)

Tel: +91(79) 23969153, 23969158, 23969159, 23969163

Fax: +91(79) 23969164

Mobile: +91 9924441365 E-mail: [pbharti@ediindia.org](mailto:pbharti@ediindia.org)

For Office use only

Receipt No. Dt.