



Xavier Institute of Social Service (XISS), Ranchi

Registration Form

Faculty Development Program on Entrepreneurship

20th January - 01st February , 2020

Photograph

1. Name: _____

2. Father's Name: _____

3. Date of Birth: _____ Age : _____

4. Category: GEN/OBC/SC/ST/Other: _____

5. Male/Female: _____

6. Qualification: _____

7. Experience: (Years) _____

Teaching: _____ Others _____

8. Designation: _____ Department: _____

9. Institute/Organisation: _____

10. Address for communication: _____

11. Phone (1) : _____ Phone (2) : _____

12. Mobile : _____ Fax: _____

13. E-Mail: _____

14. Aadhaar No. : _____ (Please attach a Photocopy)

Date: _____

Signature of the Head of the Institution

Signature of Applicant

[Note: Last date of registration : 10th January 2020.]

Registration form can be send to the Email ID: edp@xiss.ac.in, harpreet.xiss1986@gmail.com, arif.hussain.ind@gmail.com

Phone No. : 0651-2532561, Mob. : 09431350814, 9431577803

