



भारतीय प्रबंध संस्थान तिरुचिरापल्ली
Indian Institute of Management Tiruchirappalli
Faculty Development Programme
Nomination Form

Name of the Programme:

Programme Date:

Venue (Offline / Online):

Offline (Trichy / Chennai):

Name of the Applicant:

Designation:

Age:

Academic Qualification:

Residential Address:

Mobile

Phone:

e-mail:

Name of the Institution:

Address:

Fax:

Phone:

Website:

Name of the Sponsor (if any):

Designation:

Phone:

e-mail:

Payment Details: Draft No:

Amount:

Date:

Bank Name, City and Branch:

Signature of the Sponsor /Participant

The completed Nomination form along with the Draft payable in the name of "Indian Institute of Management Tiruchirappalli", should be sent to the following address:

Executive Education & Consulting,
Indian Institute of Management Tiruchirappalli
Pudukkottai Main Road, Chinna Sooriyur Village,
Trichy
Tamil Nadu 620024

In case of online payment, kindly intimate the EEC office with the relevant transaction details through email (eec@iimtrichy.ac.in), so that we can connect your remittance to your nomination.