



REGIONAL INSTITUTE OF EDUCATION, MYSORE - 570 006  
(NCERT)  
(Department of Extension Education)

REGISTRATION FORM

Programme Title: Review and finalization of Draft Syllabus of 4-year  
BSc.Ed / 6 Yr MSc.Ed / 4-year  
BA.Ed.

1. Name of the Participant: AJAYKUMAR.K.  
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3. Designation: Asst. Professor
4. Educational Qualification: MSc, BSc.Ed., NET, KSET

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6. Category : SC/ST/OBC/General
7. Are you availing Institute Hostel Facility? : Yes/No  
(Please tick )

8. Date of attending the Programme : From 12/03/2016 to 16/03/2016

Date: 12/03/2016

K Ajayk  
Signature of the Participant/Resource Person



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REGISTRATION FORM

Programme Title: \_\_\_\_\_

1. Name of the Participant: **RAVEESHA K. A.**  
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