

Registration Form for participation
Academic festival 2019, University of Kalyani
(February 7 to 9, 2019)

1. Name of the Participants:.....
2. Address**:.....
3. E-Mail:.....
4. Contact No.:.....
5. Class/Grade:.....
6. Name of the Institution/Department:.....
7. Address of the Institution:.....
8. Contact no. of the Institution:.....

9. Category for Participation (Please Tick as per your choice)

For school students

- Inter School Quiz Competition :
- Inter School Model competition :

For College Students

- Intercollege Extempore Competition :
- Intercollege Debate competition :

For University Students and Research Scholars

- Poster competition :
- Knowledge-based reality show :

10. For school students only (Name and contact no. of the authorised Person for communication)

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I declare that the above information is correct in all respect and I shall abide by the rules and regulation of the competition and the University of Kalyani.

Signature of the candidate.

Forwarded by –
(Head of the institution/ Head of the Department)

***University students and research scholars residing at hostels please mention the name of your hostel.*