**SERC School**

on

*Optical Metrology*

**Department of Physics, Tezpur University, Tezpur**

**June 01-21 2016**

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Registration Form

1. Full Name (in BLOCK LETTERS):
2. Date of Birth (dd/mm/yyyy): Age Sex M/F

(attach proof) (as on May 18, 2016)

1. Present Position/Designation:

University/Institution:

Telephone: Fax:

1. Address for Correspondence:

Pin Code:

Telephone Fax:

1. Email
2. Academic Qualifications:

Degree University/Institution year Grade

B.Sc.

M.Sc.

M.Phil.

Ph.D.

Title of Ph.D. Thesis:

Registration Number:

1. Name and address of the Refree/Supervisor
2. List the SERC Schools attended, if any:
3. List of Publications (attached separate sheet):
4. Current research Interest (Not more than 5 lines):
5. State how the SERC School will benefit you (Not more than 5 lines):
6. Letter of Reference from the Supervisor/Referee:
7. Any other information:

Signature of the Candidate

Forwarded/Recommended

Supervisor/Head of the Institution