

# OFFICE OF THE PRINCIPAL, NORTH GAUHATI COLLEGE

P. O. College Nagar, Guwahati-781031

অধ্যক্ষৰ কাৰ্যালয়,

ডাক : কলেজ নগৰ,



উত্তৰ গুৱাহাটী মহাবিদ্যালয়

গুৱাহাটী-৭৮১০৩১

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Date 05/01/2018

Ref. No. NGC /13/2

From :- Dr. Dilip Das

Principal

North Gauhati College

## Notification

Department of English, North Gauhati College in collaboration with Teaching Learning Centre, Tezpur University is going to organize an MHRD sponsored short term programme titled "Motivating Undergraduate Students to Acquire Reading and Writing Skills in English". The three day long programme to be held from 14<sup>th</sup> to 16<sup>th</sup> of February, 2018 aims at conducting quality training programme for the teachers and aspirants in various fields of studies in order to create a pool of well-trained teachers in the field of higher education. The participants of the above programme will be University/College Teachers working in the field of Higher Education. Interested individuals can send the registration form to the undersigned. Selected participants will be intimated through email. There is no registration fee.

### Important dates:

Last date of registration: 27<sup>th</sup> January, 2018

Confirmation to participants: 1<sup>st</sup> February, 2018

### Contact Detail:

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Coordinator

Department of English

North Gauhati College

Email: maloshi\_baruah@yahoo.com

Ph. No. 9435709220

(Dr. Dilip Das)

Principal

North Gauhati College

College Nagar, Guwahati - 31

Principal  
North Gauhati College

## Registration Form

MHRD Sponsored Short Term Programme  
on

### **Motivating Undergraduate Students to Acquire Reading and Writing Skills in English**

In collaboration with Teaching Learning Centre, Tezpur University  
North Gauhati College, Guwahati

Name of the Participant (In block letter):

Gender:

Category:

Do you belong to any minority community? (YES / NO):

Name of the college/Institution:

Name of the University to which  
the College/Institution is affiliated:

Date of Regular appointment:

Years of Experience:

Department:

e-mail ID:

Contact Number:

#### **RECOMMENDATION FROM THE HEAD OF THE INSTITUTION:**

I certify that Mr./Ms./Dr. .... is a regular /  
part time teacher of this College/Institution and serving as an Assistant Professor/Associate  
Professor. He/She will be released to undergo the programme if selected.

Signature & Seal  
Head of the Institution