

National Workshop on Malware Threats and Defense (NWMTD 2011)
Tezpur University, June 20-21, 2011

REGISTRATION FORM

Name :
Affiliation :
Email : Mobile:
Address :
:
:

A. Type of Registration (Please put a ✓ mark and give details of your registration type)

1) Employee in Academic/ R&D ☐ 2) Employee in Industry ☐ 3) Student ☐

Details :

:

:

B. Do you need accommodation?(Yes/No) :

If Yes

1. Duration : From: _____ To: _____
2. Type of Accommodation you prefer
2.1 University Guest House (based on availability) :
2.2 Hotel in Tezpur :
2.3 Student's Hostel :

(A Duly Signed Registration Form should be sent to “**The Convener, NWMTD 2011, Dept. of Computer Science & Engineering, Tezpur University, NAPAAM – 784 028, Sonitpur, Assam**”. Also a scanned copy of the form should be emailed to nwmt2011@tezu.ernet.in)

Date:

Signature of the applicant

Approval by the Head of the Department/Organization

I, hereby certify that Mr/Ms/Dr. is an employee/student/research fellow of this organization/department and he/she is allowed to attend the NWMTD 2011 during June 20-21, 2011 at Tezpur University.

Date:

Signature of the Head
(with Seal)