



**Centre for Stem Cell and Cancer Genomics  
AM Institute of BioScience**

Coimbatore- 641004

www.amibs.org

Email : amibioscience@gmail.com

Mobile : +91-73391-11990

**Application for Hand's-on Training Course**

**Course Opted & Date :**

**Name (Block letters) :**

**DOB & Sex :**

**Degree & Discipline :**

**Institute & Department :**

**Education Qualification :**

Degree	Discipline	College/ University	Year	% of Marks

\*CV and Covering Letter may be enclosed separately

**Contact details**

**Communication address:**

**Mobile No :**

**Email :**

I hereby declare the details furnished are true to the best of my knowledge.

Date :

Applicant signature

**For Office Use Only**

Registration Number :

Receipt Number :

Fee, DD. No. & date :

Remark if any :

**In Charge**