

NATIONAL WORKSHOP ON

**PROTECTED CULTIVATION OF HORTICULTURAL CROPS**

**(10th April, 2015)**

**Venue: Dr. Ram Manohar Lohia Memorial Hall, Vikram Sarabhai Block, Sitholi Campus**

**Time: 11:00 AM**

**Registration Form**

Name :…………………………………………………………

Faculty/Student Id No…………………………….................

Designation:……………………………………………………

Department/School:……………………………………………

Address:………………………………………………………...................................................……………………………………………………………………………………………………

………………………………………………………………………………………………………PIN:………………………

Email:…………………………………………………………

Contact No.:…………………………………………….........

 **Organized by:**

 **School of Agriculture**

**ITM University Gwalior (M.P.) 474 001 INDIA**

**Contact: Dr. Amit Kanawjia, 9165126806, amitkanawjia.agri@itmuniversity.ac.in**



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**Time: 11:00 AM**

**Registration Form**

Name :…………………………………………………………

Id No. ( For ITM Students)……………………………............

Designation:……………………………………………………

Department/School:……………………………………………

Address:………………………………………………………...................................................……………………………………………………………………………………………………

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