NOMINATION FORM (Use block letters to fill the form) Course Title: Workshop on 'e-Governance with focus on its intervention in Office Management'. Name: _____ Designation: _____ Department: Office Category (Tick any): Secretariat Directorate PSU Other Society Office Address: Phone No.: E-Mail address: —— Computer related experience: General Exposure Working Experience Nil Details of Experience: Signature of the Applicant Certified that the given particulars are verified and found to be correct. The applicant will be released only after receipt of acceptance letter from Department of Information & Communication Technology. Signature and seal of Sponsoring Authority