



MSBTE TECHNICAL PAPER PRESENTATION COMPETITION 2018-19

Application Format

Name of Institute:-

Institute Code:- Branch/Course:- _____

Date of Competition:- / / 201 Competition Conducting Instt. Code :-

Title of paper :- _____

Name of Presenter :

Surname

First Name

Middle Name

E-Mail id of Presenter:-

Contact No:-

Name of co-presenter (if any):-

Surname

First Name

Middle Name

E-Mail id of co-Presenter:-

Contact No:-

Name of Incharge Staff Member :- _____

Contact no. of Incharge Staff Member :-

Whether Accommodation Required :- Yes/No (Mention number of persons requiring)

No. of Boys

No. of Girls

Recommendation of Head of Institute : I hereby recommend above students to participate in MSBTE State Level Technical Quiz Competition 2018-1019 at your institute. I also certify that the said students are bonafide students of Final Year Diploma of this Institute.

Signature of
Participants :- 1)
2)

Signature of Principal

Seal of Institute

Date : / / 201

(Note : This application form after duly filling should be scanned and emailed to concerned co-ordinator of the host institute conducting the competition followed by telephonic confirmation with him/her)

Last Date : 7 Days prior to the scheduled date of competition.