



INDIAN
INSTITUTE OF
PUBLIC HEALTH
DELHI

Public Health Capacity Building Workshop Series III (May 2012 - November 2012)

Registration Form

| | | | |
|--|---|--------------------------------------|--|
| NAME: | | | |
| AGE: | | | |
| POSITION: | | | |
| GENDER: | <input type="checkbox"/> Male | <input type="checkbox"/> Female | |
| JOB TYPE: <i>(Tick only one)</i> | <input type="checkbox"/> Medical | <input type="checkbox"/> Nursing | <input type="checkbox"/> Allied Health |
| | <input type="checkbox"/> Social Sciences | <input type="checkbox"/> Lab Science | |
| QUALIFICATIONS: | <input type="checkbox"/> MBBS | <input type="checkbox"/> MD | |
| | <input type="checkbox"/> B Sc/M Sc | <input type="checkbox"/> PhD | |
| | <input type="checkbox"/> MSW | <input type="checkbox"/> Other: | |
| ORGANISATION: | | | |
| ADDRESS: | | | |
| PHONE NUMBER: | | Mobile | |
| E-MAIL ADDRESS: | | | |
| WORKSHOP: <i>(Please Tick)</i> | <input type="checkbox"/> 1. Qualitative Research Methods in Public Health - A Basic Course <i>(May 21 - 25, 2012)</i> <input type="checkbox"/> 2. Economic Evaluation of Health Care Programmes <i>(May 29 - June 1, 2012)</i> <input type="checkbox"/> 3. Urban Health Management <i>(Jun 12 - 15, 2012)</i> <input type="checkbox"/> 4. Advocacy in Public Health <i>(Jun 26 - 29, 2012)</i> <input type="checkbox"/> 5. Advanced Nutritional Epidemiology <i>(Jul 2 - 6, 2012)</i> <input type="checkbox"/> 6. Cancer Epidemiology <i>(Jul 16 - 20, 2012)</i> <input type="checkbox"/> 7. Theory and Practice of Health Policy Analysis <i>(Jul 17 - 20, 2012)</i> <input type="checkbox"/> 8. Project Management in Health Programmes <i>(Aug 6 - 9, 2012)</i> <input type="checkbox"/> 9. Qualitative Research Methods and Data Analysis for Public Health <i>(Sep 10 - 14, 2012)</i> <input type="checkbox"/> 10. Methods in Environmental Health Research <i>(Sep 25 - 28, 2012)</i> <input type="checkbox"/> 11. Operational Research Methods in Public Health <i>(Nov 20 - 23, 2012)</i> | | |
| DETAILS OF PAYMENT <i>(Please Tick):</i> | <input type="checkbox"/> Electronic Transfer: <i>(Please attach receipt of transaction alongwith registration form)</i> <input type="checkbox"/> Cash deposit at Bank: <i>(Please attach receipt of transaction alongwith registration form)</i> <input type="checkbox"/> Demand Draft: <i>(please give the following details)</i> Amount: _____ Drawn in favour of: _____ DD Number: _____ Payable at: _____ Drawn on Bank: _____ Dated: _____ | | |