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**Indian Institute of Geoinformatics**

**A 14-15-16, Paryavaran Complex, South of Saket, New Delhi-110030**

Email : iig@ecology.edu Tel. : 011-29533801, 011-29533830

**admission form**

**Name of the course selected ………………………………………………….**

Name of the Candidate …………………………………………………………………..…………

Father’s Name …………………………………………………………………………….…………

Mother’s Name ………………………………………………………………………………………

Date of Birth ………………………………….. Nationality………………………………………..

Address ……………………………………………………………………………………………

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Mobile ………………………………………… Telephone……………………………………..

Email ………………………………………Website *(if any)*……………………………………

Educational Qualification ………………………………………………………………………..

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Mention how will this course help you ?

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Details of Fee paid (Cheque / Draft / Electronic Transfer)

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Date Signature