**“ALVCOM – Active Learning Video Lecture Communication"**

**At BISAG, Gandhinagar**

**Registration Form**

**[1].** Name of Institute: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Branch: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please mention: Diploma / Degree)

Name of Faculty: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_Age: \_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| Contact No.: | Email: |

**[2].** Name of Subject: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (one subject per faculty)

**[3].**Language of Communication :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_( English/Hindi/Gujarati)

Experience of Faculty:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Academics:** | **Research:** | **Industry:** | **Others:** | **Total:** |
| Yrs.:\_\_\_\_\_\_\_\_\_\_Months:\_\_\_\_\_\_\_ | Yrs.:\_\_\_\_\_\_\_\_\_\_\_Months:\_\_\_\_\_\_\_\_\_ | Yrs.:\_\_\_\_\_\_\_\_\_\_\_Months:\_\_\_\_\_\_\_\_\_ | Yrs.:\_\_\_\_\_\_\_\_\_\_Months:\_\_\_\_\_\_\_ | Yrs.:\_\_\_\_\_\_\_Months:\_\_\_\_\_ |

**[4].**Relevant Experience of Video Lecture Telecasting Earlier: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_