

**DEPARTMENT OF ELECTRONICS & INSTRUMENTATION ENGINEERING**  
**and**  
**DEPARTMENT OF INSTRUMENTATION & CONTROL ENGINEERING**  
In Collaboration with **Electrono Solutions Pvt Ltd., bglore**

**REGISTRATION FORM**

**CLAD (Certified LabVIEW Associate Developer) Training and Certification**

**NAME :**

**INSTITUTION :**

**DESIGNATION :**

**DEPARTMENT :**

**EDUCATIONAL  
QUALIFICATION :**

**SPECIALIZATION :**

**ADDRESS for COMMUNICATION:**

**Whether applying for CLAD : YES / NO**

**MOBILE NO :**

**E MAIL ID :**

**DATE :**

**PLACE :**

<b>Payment details :</b>	<b>Cheque /DD No :</b> <b>Date:</b> <b>In favor "AMIE", payable Chennai)</b> <b>Name of the Bank:</b> <b>Amount:</b>
<b>Fee Details :</b>	<b>CLAD exam fee : Rs. 3500/-</b> <b>Course fee: Rs.1500/-</b>
<b>Accommodation</b>	<b>Will not be provided</b>

**Signature of the Applicant**

**Signature of Head of the Department**