**Nomination Form for Training Programme**

**Smart Digital Tools for Sustainable Agriculture**

*15 – 24 October 2024*

|  |  |  |
| --- | --- | --- |
| 1. Full Name (in block letters)  | : |  |
| 2. Present Scientific position held  | : |  |
| 3. Discipline | : |  |
| 4. Date of birth and Gender  | : |  |
| 5. Name of the Organization | : |  |
| 6 Address | : |  |
| 7. E-mail ID | : |  |
| 8. Mobile Number | : |  |
| 9. Is applicant ICAR employee | : | Yes / No\* |

*\*Non-ICAR candidate training fee has to be paid after nomination confirmation*

It is certified that, the information given above is correct

**Signature of the Applicant with date**

The particulars given by the applicant are correct and the nomination is recommended

**Signature of the Forwarding Authority with date**

**Signature of the Sponsoring Authority**

Official Stamp