



# ITN-BUET

Centre for Water Supply and Waste Management

## Application Form

(Please type or fill out in block letters and send to ITN-BUET. Also attach your Curricula Vitae.)

Name of the Course:

Date:

Duration:

### Applicant's correspondence details

Name:  Male  Female

Position:

Organization:

Employer:

Postal Address:

Postal Code/city:

Country:

Telephone:

Mobile:

Fax:

E-mail:

I will directly pay course fee for my participation: YES  NO   
(Please tick appropriate boxes)

My organization/Sponsor will pay for my participation: YES  NO

*Signature of the Applicant*

Date:

### Sponsor Guarantee

Name of the Organization:

Name & Designation of the Authorized Person:

Postal address:

Telephone:

Fax:

E-mail:

Date:

*Signature & Official Stamp*

(Please note that your participation can only be confirmed upon approval of your application by ITN-BUET, and payment of course fee.)