



**ICT Continuing Education Centre  
Industry Institute Partnership Cell  
DAYALBAGH EDUCATIONAL INSTITUTE  
DAYALBAGH, AGRA**

Date: Sep 30th

Name: \_\_\_\_\_ M / F

SC/ST\_\_ OBC\_\_ G\_\_

2. Program of STUDY

\_\_\_\_\_

3. CLASS \_\_\_\_\_ ROLL NO. \_\_\_\_\_

SEMESTER \_\_\_\_\_

Contact Info. \_\_\_\_\_

3. NAME OF COURSE::

**Time Management 1 Day Workshop**

Prerequisite: Basic Skills

Signature of Applicant: \_\_\_\_\_

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

For Office Use:

Amount Paid: \_\_\_\_\_ Date: \_\_\_\_\_

Fees 100/ per day

Amount Pd \_\_\_\_\_ Date \_\_\_\_\_



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