



Centre for Foreign Language  
**SCHOOL OF MANAGEMENT SCIENCES**  
VARANASI

**REGISTRATION FORM**  
**(French Language Summer Camp)**

Passport Size  
Photograph

1. Name : .....

2. Highest Qualification: .....

4. Father's Name : .....

5. Address : .....

.....

.....

6. Phone No. : .....

7. Email id : .....

8. College / : .....

School Name Address

Tick the Batch you wish to opt :

**Batch -I** : 28<sup>th</sup> May to 03<sup>rd</sup> June 2018

**Batch- II** : 25<sup>th</sup> June to 01<sup>st</sup> July 2018

(Signature)

Kindly Submit filled up form along with Registration Fee Rs. 750/- to Dr. Pallavi Pathak, Asst Professor, SMS Varanasi

Mob : 7007828875