

## NATIONAL INSTITUTE OF MENTAL HEALTH & NEUROSCIENCES (NIMHANS)

Bangalore-560029, Karnataka State, INDIA

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## Application form for "Hands-on Workshop in Mitochondrial Biochemistry, Histochemistry and Electron Microscopy"

1. Name:	Gender: M/F	
2. Age:	_ years	
_	tment and College/Institute/University:	
5. Official address:_		
_		
Telephone no.:	Mobile no.:	
Email:		
3. Qualification:		
-	er/lecturer/tutor, name of the course that you teach:	
5. Give a brief overy	view of your research interests along with a description pyour career(Max 100 words)	n of how this
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Place:		Signature of the candidate
Date:		
9. Recommendat	ion:	
1. Head of the de	epartment	
Dlago	Signatura.	
Place: Date:	Signature: Seal:	
Date.	Stai.	
2. Head of the co	llege/Institution/University	
Place:	Signature:	
Date:	Seal:	