

APPLICATION FORM

Affix Passport
Size Photograph

1. **Name** (In BLOCK LETTERS) (Mr. / Ms. / Mrs. / Dr.):

2. (i) **Organisation:** _____

(ii) **Designation:** _____

3. (i) **Phone** (Office /Residence): _____ **Mobile:** _____

(ii) **E mail:** _____

4. **Select the Course and Methodology**

Certificate in International Trade Management (CITM)

By Correspondence

Certificate in Intellectual Property Management (CIPM)

Yes

No

5. **Mode of Payment:** Demand Draft Cheque Bank Transfer
(in favour of 'Institute of International Trade, Kolkata')

Demand Draft / Cheque No.: _____ **Date:** _____

Drawn on (Bank): _____ **Branch:** _____

Signature of the Candidate: _____

For Office Use

Admission No.: _____

Date: _____

Authorized Signatory: _____

Kindly fill up the form and either courier / fax / email it to:

Institute of International Trade

EN-27, Salt Lake City, Sector V, Kolkata - 700 091, WB

Ph: +91 33 4004 8652; **Fax:** 033 2243 7688

Email: info@iitrade.ac.in; **Web:** www.iitrade.ac.in