



MANAGEMENT DEVELOPMENT PROGRAMMES

TRAINING NOMINATION FORM

Name of the Programme _____

Duration _____

PARTICULARS OF NOMINEE

Name of the Participant (s) _____
Designation _____
Email _____
Mailing Address _____
Contact Number (with STD Code) _____; Office: _____
Fax _____

Nomination Status (please tick) Residential ☐ Non-Residential ☐

SPONSOR

Sponsoring Organization/ _____

Tel. No. (with STD Code) _____
Fax No. _____
E-Mail _____

REMITTANCE

Cheque No.: _____ Dated _____
For Rs. _____ Drawn on _____

Signature: _____

Sponsor : _____

Nomination from may please be Mail this to :

Management Development Institute

Mehrauli - Gurugram Road, Sukhrali
Gurugram 122001, Haryana (India)

Tel. No. (+91-124) 4560004, 4560008, 4560534

E-Mail: mdp@mdi.ac.in

Details required for GST Invoice

Sr. No.	Particulars	Remarks
A.	Bill to be issued in name of :	
Mention your PAN, GST Number & SAC. Mention Bank details for NEFT Payment. Mention our PAN & GST Number in your Invoice.		
1	GST Number	
2	Name	
3	Address	
4	City /Postal code	
5	State / Country	
6	Permanent Account Number (PAN)	
B	Address to Send Courier	
7	Name	
8	Address	
9	City /Postal code	
10	Phone / Fax	