



**National Conference
On
INNOVATIONS IN CHEMICAL AND PHARMACEUTICAL SCIENCES**



1. Full Name: _____
2. University/Organization: _____
3. Mailing Address: _____
City: _____ State/Province: _____
Zip/Postal Code: _____ Country: _____
4. Telephone: (_____) _____; Mobile: _____
5. Email: _____
6. Registration type: UG and PG Students (Rs. 500) ()
 Research Scholars (Rs. 1000) ()
 Faculty (Rs. 1500) ()
 Industry (Rs. 2500) ()
7. Payment details:
DD No. _____, Date: _____;
Or transaction acknowledgement receipt in case of online transfer in favour of Head of the Department,
M. Sc (Pharmaceutical Chemistry) 5YRS-IC, A/c No. 33683510191, IFSC Code: SBIN0013804
(Students and Scholars need to provide their student id for registration in their respective category)
8. Whether accommodation is needed: Yes/No; If Yes: Student dormitory / Hotel Accommodation
9. Please indicate in which optional activities you will be participating / attending in conference
 1. Telangana University Pharmaceutical Chemist Alumni meet
 2. Cultural Activities
 3. Quiz Competition
 4. Computer Aided Drug Design Workshop
 5. Arrangement of stall
 6. Trip to Basara Saraswathi Temple
10. Any other accompanying persons: Yes/No
(Additional 50% registration fee has to be paid for each accompanying person)
11. Any other additional information:

Submit filled in registration form to pharmachem@telanganauniversity.ac.in along with abstract, if present.