

G H Patel Post Graduate Department of Computer Science and Technology
Sardar Patel University, Vallabh Vidyanagar
&
CSI Vallabh Vidyanagar Chapter
Organize

STATE LEVEL IT COMPETITIONS (2019)

Registration Form

Name of the Contest* : _____

Name of Institute : _____

Institute Address : _____

Email ID : _____

Phone No. : _____

Details of Participants

Name of Student-1 : _____

Course : _____ Semester : _____

Mobile and Email : _____

CSI Membership No. (for CSI member – if applicable) : _____

Name of Student-2 : _____

Course : _____ Semester : _____

Mobile and Email : _____

CSI Membership No. (for CSI member – if applicable) : _____

Payment Details

Amount Rs. : _____ Mode of payment : _____ (Cash/DD)

(Demand Draft should be in favour of CSI V V NAGAR CHAPTER)

Seal and Signature of Principal/Head/Director

Correspondence Details

Email : gdcstcompetition@gmail.com

*** Name of Contest**

Programming : Dr. P V Virparia [94265 33146] **Web Design** : Mr. B. B. Patel [98258 09282]

Poster Presentation : Dr. P S Sajja [98249 26020] **IT Quiz** : Dr. P P Pittalia [94275 21787]

NOTE : Students can participate in maximum two events, however, participants of IT Quiz competition cannot participate in other competitions. Separate registration is required for each event.