



MDI
GURGAON

Management
Development
Institute

MANAGEMENT DEVELOPMENT PROGRAMMES

TRAINING NOMINATION FORM

Name of the Programme _____

Duration _____

PARTICULARS OF NOMINEE

Name of the Participant (s) _____

Designation _____

Mailing Address _____

Contact Number (with STD Code) _____; Office: _____

Fax _____

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Nomination fee may please be sent, along with nomination form by Demand Draft/Cheque drawn in favour of "**MANAGEMENT DEVELOPMENT INSTITUTE, GURUGRAM**".

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