Technial Training on Photovoltaic Water Pumping (PVWP) System

and how	Registration Form (Individual)						
on frees.	Solar PV Water Pumping					A recent PP size photograph	
	Personal Details of the Participants						
Full Name							
	Prefix	First Name		Middle Name		Last Name	
Address	Street Address						
			Ī				
			,				
	City District			District	t		
Phone Number							
	Area Code	Office Number	Area Code	Home Number		Cell Number	
				How many pumps have			
Email				you designed/installed			
				?			
		Degree*	Year	Nam	e of Institut	ion	
Qualification	1.	Degree	/E T )	,,,,,,,	e of morreac		
	2.						
	3.						
	*Highest degre	e first					
General Experiences	1.						
	2.						
	3.						
	4.						
	5.						
Specific Experiences related to Solar PV	1.						
	2.						
	<i>3. 4.</i>						
	5.						
	<u> </u>		N1	The second consequence of the second consequ	*:	T th - ma- f	
<u>Declaration:</u> If required, upon a week time notice I can produce the proof certificate of above mentioned experiences.							
Suggestions or				Signature:			
topics you				2.3			
would like to be				Hand Written Name			
included in the							
training?				Date:			

Note: This personal information must be submitted with highest degree certificate only. The form can be submitted at Aleternative Energy
Promotion Center, Khumaltar, Lalipur (01-5539390) or Winrock International Office, Baneswor 01-4467087

Deadline for the submission of this form is 07 October, 2016



