

## NOMINATION FORM

## ITP on "Budgeting, Accounting & Financial Management"

## TO BE FILLED IN BY THE NOMINEE

Name: (As in Passport): [Mr./Ms.] First Name			
Surname:			
Gender: Male _	/ Female	Date of Birth DD/MM/YYYY)	
		Director/ Jt. Director /Dy. Secy / Under Secy / Section	
		icable)	
Basic Pay	Grad	le Pay	
		to: Passport Type: Personal / Official	
Organisation			
Address for com	munication		
City	Pin Code:		
Phone (O)	(R)	Mobile:	
Organization Designation	nsor	for 4,00,000/- (Rupees Four lakhs only)	
	r course drawn in fa	avour of "National Institute of Financial Management" at	
If payment made	e through RTGS/N	EFT (Bank Details overleaf)	
	Tr. ID		
UTR No			
	munication (of the sp	ponsor)	
City		Pin Code	
Phone		_ Fax	
E-mail:		_	
Date:			

Please return the duly filled in form to:

Dr. Namrata Agrawal, Professor (IT)
Professor & Course Director

NATIONAL INSTITUTE OF FINANCIAL MANAGEMENT

(Ministry of Finance, Government of India) Sector-48, Pali Road, Faridabad-121001, Haryana Ph. No. (O) 0129-2465231 & Fax: 2418891 / 2418867

## BANK DETAILS FOR PAYMENT OF COURSE FEE

Name of the Account Holder	National Institute of Financial Management
Beneficiary Address	Sector – 48, Pali Road, Faridabad – 121001
	Haryana
Name of the Bank	HDFC Bank
Address of the Bank	1-2 Chowk, Tikona Park, NIT-2, Faridabad
Saving Account No.	50100083121045
RTGS (IFSC) Code	HDFC0002445
NIFM PAN No.	AAAAN2489D
NIFM GSTIN No.	06AAAAN2489D1ZQ