

TRAINING APPLICATION FORM

For Office Use only	Request No.: MULTIPLELABS/ TRAINING/
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APPLICANT CONTACT DETAILS:

Name of the applicant	
Address	
Name of Company/ Institute	
Designation/Study	
Contact No., Fax no.	
E-mail id.	

TRAINING REQUIREMENTS:

Name of the Instrument/s (Mark ✓)	GC, HPLC, UV-Spectrophotometer
Courses (Mark ✓)	Theory
	Instrumentation
	Practical
	Hand on training
	Troubleshooting
	Method Development
	Validation
	Regulatory Affairs
No. of Days for training required	
Preferable Date	
No of candidates (in case of group)	

(*Note: for each instrument minimum 2 days will be required for training)

Thank you for filling up the Questionnaire. We shall soon get back to you with charges as per your training requirement.

Regards,

MultipleLabs

(An entity of Analytical Technologies Limited)

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Website: www.multiplelabs.com