



BIOINFORMATICS INSTITUTE OF INDIA

(A unit of Strategic Edutech Pvt. Ltd.)
An ISO 9001:2008 Certified Institute
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Re-Registration Form

Distance Learning Programs

NO COLUMN SHOULD BE LEFT BLANK (ALL IN BLOCK LETTERS)

1. Enrollment No.*: _____
2. Name of the Candidate: _____
3. Father's Name: _____
4. E-mail: _____
5. Address for Correspondence: _____

City: _____ State: _____
PIN: Country: _____
6. Phone / Mobile Number: _____
6. Cross Demand Draft / Cheque No. _____ Dated _____ Drawn on _____
for ₹ _____.

(Bank Draft / NEFT / Cheque must be drawn in favor of "Bioinformatics Institute of India". Participants are advised to write their Name and Address at the back of Demand Draft/Cheque. For NEFT details call or mail us.)

Date: _____

Place: _____

(Signature of the Candidate)

*As provided by the Institute at the time of registration