

BIOINFORMATICS INSTITUTE OF INDIA

(A unit of Strategic Edutech Pvt. Ltd.)

An ISO 9001: 2015 Certified Institute

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Admission Form

Distance Learning Programs

Pr	ogram Applied For (Select	: One):			
	Industry Program in Bioinformatic Industry Program in Biotechnolog Industry Program in Cheminforma Industry Program in Pharma Reg Industry Program in Pharma Qua Industry Program in Clinical Trials Industry Program in Intellectual F Industry Program in Healthcare & Industry Program in Clinical Trials Industry Program in Forensic Sci	gy (BIOT) atics & Drug Designing (IPCD) ulatory Affairs (PRAF) lity Assurance & Quality Contr s Data Management & Pharma roperty Rights (IIPR) t Hospital Administration (IHH s Research & Administration (I	rol (QAQC) acovigilance (CDPV) A)		Paste your self attested photograph
Enrollment No. (For Office use only)					
1. 2. 3. 4.					
5.	Address for Correspondence				
7.	Nationality Telephone No. E-mail	CityState Code(O)			
9.	Academic Qualifications	Exam Passed / Appearing	Board/University	Year Resul	t with Percentage
10.	Work Experience (If Applicable)	Full Name of the Organization	Designation	Total Wo	rk Exp. (In yrs.)
11. How did you come to know about us: ☐ Website ☐ Internet Search ☐ BII Mailer ☐ Friends / Relative/ Brand Ambassador ☐ Advertisement / Poster					
12. Crossed Cheque/Demand Draft No dated Drawn on for (Bank Draft/Cheque/NEFT Must be drawn in favour of Bioinformatics Institute of India. Candidates are advised to write their name and address at the back of Demand Draft/Cheque). For NEFT details call or mail us.					
** Important Note: The program in which you are seeking participation, is BII's independent knowledge enhancement program, which gives insight about mentioned study areas. In case of any dispute, it would have to be get resolved through arbitration under Arbitration and Conciliation Act 1996 by the sole arbitrator appointed by Bioinformatics Institute of India, Noida. The jurisdiction of the same will be to the Courts of District Gautam Buddha Nagar, Noida only. Fee once deposited is neither refundable nor adjustable under any circumstances.					
**Mandatory to fill **Declaration by the Candidate					
I declare that I have carefully read and understood the details of the above program and that I have given the true and correct information while filling up this form. It may be open for the Institute to take action in case any of the information given by me is found incorrect.					
Date:					
Plac	ce:		(SIGNATURE OF THE CANDIDATE)		