

**MUSHROOM SPAWN AND COMPOST PRODUCTION CENTRE
DEPARTMENT OF MICROBIOLOGY
FACULTY OF BASIC SCIENCES AND HUMANITIES
Dr. RAJENDRA PRASAD CENTRAL AGRICULTURAL UNIVERSITY, BIHAR
PUSA (SAMASTIPUR) – 848125**

Registration Form for Tribal's Training Programme on Mushroom

FROM _____ TO _____

1.	Name of applicant (in capital letter only)	:	
2.	Father's/Husband Name	:	
3.	Permanent Address	:	
a.	Village	:	
b.	Post Office	:	
c.	Block	:	
d.	District	:	State : Bihar
e.	Sex (Male/Female)	:	Mobile No.
4.	Date of Birth	:	Age :
5.	Occupation	:	Farmer/Student/Other
6.	Family size	:	
7.	Educational Qualification	:	
8.	Self financed/Nominated by organization	:	
9.	Fee if any	:	
10.	Experience in Mushroom production	:	

Place :

Date :

Signature of Candidate

MUSHROOM SPAWN AND COMPOST PRODUCTION CENTRE
DEPARTMENT OF MICROBIOLOGY
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Dr. RAJENDRA PRASAD CENTRAL AGRICULTURAL UNIVERSITY, BIHAR
PUSA (SAMASTIPUR) – 848125

Registration Form for "Mushroom Production Technology" Training Programme

FROM _____ TO _____

1.	Name of applicant (in capital letter only)	:		
2.	Father's/Husband Name	:		
3.	Permanent Address	:		
a.	Village	:		
b.	Post Office	:		
c.	Block	:		
d.	District	:		State : Bihar
e.	Sex (Male/Female)	:	Mobile No.	
4.	Date of Birth	:	Age :	
5.	Category	:		
6.	Occupation	:	Farmer/Student/Other	
7.	Family size	:		
8.	Educational Qualification	:		
9.	Self financed/Nominated by organization	:		
10.	Fee if any	:		
11.	Experience in Mushroom production	:		

Place :

Date :

Signature of Candidate