

APPLICATION

Online Course on Disaster Risk Management

1. NAME OF THE COURSE* :- CDRMF CBDRM CIC SC RSLUP
 DRNA GENDER FS RA ERR

PHOTO

2. NAME OF THE APPLICANT :-

3. DATE OF BIRTH :- 3a. AGE :-

4. GENDER :- MALE FEMALE

5. QUALIFICATION :- UNDERGRADUATE GRADUATE POST GRADUATE OTHERS (PLSPECIFY)

6. CURRENT OCCUPATION :-

7. EXPERIENCE IN DISASTER MANAGEMENT (IN YEARS.) :-

8. CORRESPONDENCE ADDRESS :-

9. TELEPHONE NUMBER :-

10. MOBILE NO.

11. e-MAIL ID :-

12. DETAILS OF ONLINE COURSES ATTENDED :-

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13. HOW DID YOU KNOW ABOUT THIS COURSE ?

NIDM WEBSITE SUGGESTED BY FRIENDS GOOGLE SEARCH NEWSPAPER
 OTHER SOURCES

14. COURSE FEE DETAILS :-

NAME OF THE BANK	BANK DRAFT	BANK TRANSFER	FEE AMOUNT (Rs.)
	No.	No.	
	Date	Date	

NOTE :- BANK DRAFT SHOULD BE IN FAVOUR OF THE EXECUTIVE DIRECTOR, NIDM PAYABLE AT NEW DELHI

I hereby declare that all the statements made in this application is true to the best of my knowledge and belief.

(SIGNATURE OF THE APPLICANT)

* CDRMF-Comprehensive Disaster Risk Management Framework(Basic); CBDRM- Community Based Disaster Risk management
 CIC- Climate Change & Disaster Risk ;SC-Safer Cities ;RSLUP- Risk Sensitive Land Use Planning ;DRNA- Damage & Reconstructions Needs Assessment ;GENDER-Gender Aspects of Disaster Recovery & Reconstruction ; FS- Financial Strategies for managing economic impacts of disasters ; RA- Risk Identification,Assessment & Analysis