



بوليتكنك البحرين  
Bahrain Polytechnic

# 9<sup>th</sup> Annual Teaching and Learning Symposium – 2018

## Registration Form

**Prefix**  Mr.  Ms.  Miss  Mrs.  Dr.

**Gender**  Male  Female

**First Name** \_\_\_\_\_

**Last Name** \_\_\_\_\_

**Degree**  Bachelor's (specify degree) \_\_\_\_\_  
 Master's (specify degree) \_\_\_\_\_  
 PHD (specify degree) \_\_\_\_\_  
 Others, please specify \_\_\_\_\_

**Job Title** \_\_\_\_\_

**Email** \_\_\_\_\_

**Mobile** \_\_\_\_\_

**Institution Name** \_\_\_\_\_  
N/A (if not currently employed)

**Years of Experience** Educational \_\_\_\_\_  
Administrative \_\_\_\_\_

**How did you hear about this workshop?**  Email  Polytechnic's Website  
 Phone  Social Media  
 Friend  Advertisements  
 Colleague  Others (please specify)

**Payment Method**  Self-Paid  Paid by Employer

**Cheque** Bahrain Polytechnic

**Wire Transfer** **SWIFT** BBKUBHBM  
**IBAN No.** BH47BBKU00100000337563

The registration fee will be 100 BD per person.

Payments can be made by Cheque, Card or Transfer. Cash will not be accepted and the fees are non-refundable.

### For Finance use only:

Receipt Number: \_\_\_\_\_

Staff Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Paid Stamp: