

Date: Signature:

8th Annual Teaching and Learning Symposium – 2017 Registration Form

Prefix	O Mr. O Ms. O Miss O M	rs. O Dr.
Gender	O Male O 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 Phone Friend Colleague Polytechnic's Website Social Media Advertisements Others (please specify) 	
Payment Method	Self-PaidPaid by Employer	ChequeCardWire Transfer
Fees	 1 Participant (1 Day, BD 100) 1 Participant (4 Days, BD 300) 2 Participants (4 Days, BD 600, get one free seat for 3rd participant) 	
Payments can be made by Ch	neque, Card or Transfer. Cash will not	be accepted and the fees are non-refundable.
For Finance use only:		
Receipt Number: Staff Name:	Paid St	amp:

Please complete this form and send it back to teaching.learning@polytechnic.bh