

## PROFORMA

I wish to participate in the Extension Lecture Program and would like to offer the following lecture(s) during 2017-18

Sl. No.	Title of the Lecture	Name, Designation and Dept. Telephone Nos. and e-mail address	Level of Lecture Colleges/High School/Any level	Language English/ Kannada	Place of the Lecture Any Place/ Identify the place
1					
2					
3					
4					
5					
6					

Residence Address and Phone No.

Signature