

Workshop on
Times-to-Events and Time Series Data Analysis using R
15 18 December, 2017

Registration Form

Name: _____

Designation & Affiliation: _____

Address for correspondence _____

Email: _____

Telephone: _____ Fax: _____

Sex: Male Female

Highest Degree: _____ Subject: _____

Areas of Specialization: _____

Expected Arrival Date _____ Time _____. Departure Date: _____ Time _____

Mode of Transportation: Train / Bus / Flight

****Do you need accommodation?:** _____. If yes, for how many?

From _____ (Date and Time) to _____ (Date and Time)

***Enclosed Demand Draft for Rs. -----,**

***Name of the Bank and DD No. _____ Dated _____**

***In case of online transfer: Journal number: _____ Amount: _____, Date: _____**

Signature: _____

Date: _____

*** Please make the payment only after your final selection.**

****PS: Accompanying persons, if any have to be registered by paying full fee and they will also be charged for their accommodation.**

Send the filled Registration form to: Prof. N. Balakrishna, The Convener, STATIB-2017, Department of Statistics,
Cochin University of Science and Technology, Cochin 682 022.