



**CENTRE FOR ALTERNATIVE DISPUTE RESOLUTION (CADR)**

**REGISTRATION FORM FOR TRAINING IN THE SKILLS  
OF CONCILIATION AND MEDIATION (CERTIFICATE COURSE)**

**Registration Form**

(Use Block Letters)

1. Full Name : \_\_\_\_\_
2. Age: \_\_\_\_\_ yrs.
3. Sex: M / F \_\_\_\_\_
4. Permanent Address: \_\_\_\_\_  
\_\_\_\_\_
5. Occupation: \_\_\_\_\_
6. Qualification: \_\_\_\_\_
7. Tel.No.: \_\_\_\_\_
8. Fax No.: \_\_\_\_\_
9. Email Address: \_\_\_\_\_
10. Signature: \_\_\_\_\_
11. Place: \_\_\_\_\_
12. Date: \_\_\_\_\_

**Note:**

1. The Programme is for ..... days and attendance is compulsory for Certificate.
2. Training will be in English.
3. Fees Rs. 3000 (inclusive of course material, lunch, tea, snacks etc.)
4. Please send your Application Form along with Cheque drawn in favour of Centre for Alternative Dispute Resolution at 102, Business Plaza, 1<sup>st</sup> Floor, 33, Gazdar Bandh Road, Santacruz (West), Mumbai – 400 054, Email Id: firdoshkassam@hotmail.com or cadrmumbai@gmail.com.
5. For further details contact: Tel. 26603066 / 32907955. Cell Phone No. 9821314350.
6. Limited seats on first come first served basis.