

Kerala Council for Historical Research

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APPLICATION FORM

SHORT TERM COURSE IN GREEK AND LATIN *with special reference to written sources on Indo-Roman trade*

Name

Age & Date of Birth

Address (Office) Phone No./E mail

Address (Residence) Phone No./E Mail

Educational Qualifications

Whether employed? If Yes, details

Purpose of Study

Time Schedule (Tick your choice) 1. Evening & Morning Classes (2 hrs each)

2. Day Time Classes (from 10 am to 4 pm)

Date:

Signature of the Applicant

For Office Use only

Admission No -----

Details of Payment: Cash/Cheque/DD No -----

Receipt No. & Date -----

Director KCHR