GLOBAL ENTREPRENEURS GRID

CAMPUS AMBASSADOR PROGRAM

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**Soft copy of your recent Picture**

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| **PERSONAL DETAILS** |
| **Name: Dr. / Prof./Mr./Ms. :** |
| **Contact No. and Email :** |

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| **INSTITUTION** |
| **Name:** |
| **Address:** |

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| --- |
| **DIRECTOR/HOD/DEAN’S DETAILS** |
| **Name** |
| **Contact Details:** |

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| **POSSIBLE AREAS FOR KNOWLEDGE SHARING AND COLLABORATION** |
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| **DECLARATION** |
| **I hereby declare that the above information is true and the application has the consent of Management/Director/HOD/Dean of our college.** |

**Name**

**Date:**

|  |
| --- |
| ***Electronic correspondence doesn’t require signature and treated as official.*** |

**Send it to:** [**chairman@globalentrepreneursgrid.com**](mailto:chairman@globalentrepreneursgrid.com)