



**ADMISSION FORM FOR CLASSROOM PROGRAMS**

**Registration No:** .....  
(For Office use only)

**Course Selected:** .....

Paste your recent  
passport size photograph  
here

**Please fill in the following details**

**1. Name:**.....

**2. Father's name:** .....

**3. Date of Birth:** ..... (DD/MM/YY)    **4. Sex :** Male     Female

**5. Address:** .....  
.....  
.....  
.....

**6. Telephone number:** .....

**7. E mail:** .....

**8. Qualification:** .....

ICBio Clinical Research Pvt. Limited  
H.O. 16, ICBio Tower, Yelahanka Main Road  
Chikkabetahalli, Vidyanarayapura  
Bangalore – 560097, Tel: 080 – 41603002/03, Fax: 080 – 41603004  
E-mail: [info@icbio.org](mailto:info@icbio.org), Website: [www.icbio.org](http://www.icbio.org)



## 9. INSTRUCTIONS

- Registration fee of Rs 20,000 is mandatory along with the application form.
- 1<sup>st</sup> installment should be paid within one month from the date of the commencement of the course.
- 2<sup>nd</sup> installment should be paid within two months from the date of commencement of the course.
- 2 passport size photographs, photocopies of the certificates and updated Resume / CV must be submitted along with the application.
- Soft copy of CV / Resume should be send to [students@icbio.org](mailto:students@icbio.org)

## 10. Terms & Conditions :

- ICBio Offers 100 % job assurance to every six month / one year course student, within 6 months of successful completion of the Course.
- Student must have 75 % attendance for the job assurance.
- ICBio shall not be liable to provide the job if the student fails to attend 4 interview calls arranged.
- Fee once paid cannot be refunded / adjusted / Transferred under any circumstances.
- Job obtained by any students with individual / own efforts will end up ICBio s liability for providing the same.

Date :

Students Signature :

Parents/Guardians signature :

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