Govt. Engineering College, Sreekrishnapuram Palakkad.
Technology Business Incubator (TBI)

Registration Form

1 Name of entrepreneur :

2 Residential address (Permanent):

3 Gender (male/female) :

4 Phone number(s) :

5 email id :

6 Date of Birth :

7 Educational qualification :

8 if student, name & address :

    of college with ph no.

9 Title of project :

    (product/service proposed)

10 Brief description of project :

11 Industrial experience :

12 Entrepreneurial experience :

13 R&D experience :

14 Market experience :

15 Present status of project : (idea level / implementation level)

[*Kindly attach the detailed project proposal and CV of the all team members along with this form*]

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FOR OFFICE USE

Candidate ID No	Interview Attended	Approval Status
	Yes / No	

Remarks :

TBI Coordinator