

# INDIAN INSTITUTE OF BANKING & FINANCE

(ISO 9001:2015 Certified)

# NOMINATION FORM FOR BANKS/ FIs & Individual Candidate

Program title: Two Days Online Program LIQUIDITY RISK MANAGEMENT IN BANK Date: 28th November 2023 (Tuesday) & 29th November 2023 (Wednesday) **PARTICIPANTS NOMINATED:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Sl. No | Name (Mr/Mrs/Ms) | Designation | Branch/Office | Contact No. (Mobile No & Landline No.) | E-mail (PERSONAL AND OFFICIAL MAIL ID BOTH)\* |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |

# \*LOGIN DETAILS OF THE PROGRAM SHALL BE SHARED ON PERSONAL MAIL ID.

Name of Bank/ FI: Address:

**GST Details** of Nominating Bank:

Phone of **Nominating** Official: E-Mail of **Nominating** Official:

Attending : Physical/Virtual:

**Fee**: Rs.4000/- + GST per participant plus GST @18% aggregating to Rs.4720/ (In case of TDS deduction, please send us TDS certificate).

Programme fees may be remitted to the credit of Institute’s account as given below:

* Beneficiary Name: Indian Institute of Banking and Finance
* Name of the Bank branch: State Bank of India, Vidya Vihar (West), Mumbai.
* SB Account No: 36919200263 IFSC code: SBIN0011710
* (PAN No: AAATT3309D and GSTIN NO. 27AAATT3309D1ZS)

# (Please provide your GSTN in the nomination letter)

**Please send your nominations at the**

# earliest to:

Mr. Arun Mishra, Faculty, IIBF

Email: fm.trg4@iibf.org.in Mobile No. +91 75060 78993