

<b>DBT-BIOTECH INDUSTRIAL TRAINING PROGRAMME (BITP) REQUISITION FORM FOR COMPANY</b>
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**Part I**

1. Company Details: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

District: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Pin code: \_\_\_\_\_

Landline No.: \_\_\_\_\_

2. Details of R&D Head/ Institutional Head:

Name (with salutation): \_\_\_\_\_

Designation: \_\_\_\_\_

Email ID: \_\_\_\_\_

Mobile No.: \_\_\_\_\_

3. Details of HR Head:

Name (with salutation): \_\_\_\_\_

Designation: \_\_\_\_\_

Email ID: \_\_\_\_\_

Mobile No.: \_\_\_\_\_

4. Details of Contact person:

Name (with salutation): \_\_\_\_\_

Designation: \_\_\_\_\_

Email ID: \_\_\_\_\_

Mobile No.: \_\_\_\_\_

5. Year of establishment: \_\_\_\_\_

6. Status:  
(Public Ltd. /Private Ltd. /Public Sector/Other) \_\_\_\_\_

7. Number of employees: \_\_\_\_\_

8. Activities taken by research group: \_\_\_\_\_

9. Company Expertise: \_\_\_\_\_

**(Please attach a copy of company profile, profiles of scientists who will supervise the trainees)**

10. Facilities which can be provided  
by the company: \_\_\_\_\_  
(like hostel accommodation,  
canteen, transport etc.) \_\_\_\_\_

11. Feedback on BITP based on  
previous experience, if any: \_\_\_\_\_

12. Bank Details (for transfer of Bench fee):

Name of company as per bank account \_\_\_\_\_

Account number \_\_\_\_\_

NEFT/IFSC Code \_\_\_\_\_

Bank name \_\_\_\_\_

Branch address \_\_\_\_\_

**(Signature)**

**Date:**