

# Supten Institute

T-12, Jains West Hills, Sowripalayam Road, Udayampalayam  
Coimbatore 641 028  
Tamil Nadu, India

## Health Informatics Online Certificate Course

### Application Form

**Name:**

**Educational Background:**

**Corresponding Address:**

**Phone: Fixed:**

**Mobile:**

**Email:**

**Reasons for applying to this Course:**

**Expectations from this Course:**

**Donation Details:**

**Crossed Demand Draft** drawn in favor of “**Supten Institute Foundation**”, payable at Coimbatore, worth ` 10,000/= (Indian Rupees ten thousand only) or US\$ 300.00

**DD or NEFT number:**

**Bank & branch:**

**Date:**

**Wire transfer details:**

**A/c name: Supten Institute Foundation**

**A/c No. 166013500000207**

**Bank: Karur Vysya Bank, Coimbatore, Avinashi Road branch**

**Address: 1391 E, F, Avinashi Raod, Peelamedu, Coimbatore 641004**

**Phone: [\(+91\)-422-2592202](tel:+914222592202)**

**IFSC Code: KVBL0001660**

**MICR: 641053017**

**SWIFT Code: KVBLINBBIND**

**SIGNATURE (with Place and Date):**

*The User id and the password will be sent to the applicant by email only, after realization of the donation.*

All disputes regarding this course are subject to the jurisdiction of Coimbatore.

Please send the completed Application Form along with the Crossed Demand Draft to: **Dr. S N Sarbadhikari, Supten Institute, T-12 Jains West Hills, Sowripalayam Road, Udayampalayam, Coimbatore 641 028. Phone: (+91) 91590 32857. Also, email a scanned copy of the filled up Application Form to [supten.institute@gmail.com](mailto:supten.institute@gmail.com) for enrollment.**