

CEEWA-Uganda

Registration form

Course Details:

Course Title: Monitoring and Evaluation Training Workshop

Course dates: 13th-17th October 2008 at CEEWA-Uganda, Kansanga Kiwafu Road

Personal details:

1. Name (please write it as you wish to appear on your certificate)

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2. Sex Female Male

3. Employment Details:

Name of your organization

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.....

Organization type NGO CBO Private Government

You're current Job Title.....

Address of organization:

.....

.....

Telephone contacts at work and Mobile

Organization Fax.....

E-mail address.....

Please after filling this form return it by e-mail or physically to
CEEWA-Uganda Kansanga Kiwafu Road
P.O Box 9063, Kampala-Uganda
Tel: 256-41-4269477/507 or 0772595471, Fax: 256-41-4269469
Email: info@ceewauganda.org
Website: <http://www.ceewauganda.org>