



Professional Development Workshops

Registration Form

Instruction: Please FILL the form completely.

Full Name (BLOCK LETTER): _____

Gender: Male Female

Qualification: _____

Currently employed: Yes No

If yes, your present designation: _____

Name of Institution where employed: _____

Year/s of Experience of teaching (if any): _____

Contact Number: _____ Email address: _____

Workshop/s you would like to attend:

- It's not about more, it's about the difference: strategies for effective interactive lecturing
(Fee: Rs. 3000/-)
- Facilitation skills: Strategies to better student learning in small groups
(Fee: Rs. 3000/-)
- Flipped classroom What is it and how best to use it?
(Fee: Rs. 3500/-)
- Clinical teaching strategies: When the time is limited...
(Fee: Rs. 3000/-)

Date

Signature

Steps for Registration:

- Download Registration form from www.lnh.edu.pk *or* request on email
- Pay fee at LNH Cash counter, Block "C" (*next to Wajid Ali Shah Complex*)
- Submit registration form along with copy of paid voucher at
Department of Health Care Education, Block "M", LNHMC *or* email scanned copy of
form and voucher at faiza.ambreen@lnh.edu.pk