



From,
Registrar General
High Court of Judicature at
Allahabad.

To,
All the District Judges,
Subordinate to the High Court of Judicature at
Allahabad

No. 266/Inf. cell. (H.C.)... Dated... 05.01.2017

Sub: **'State Level Judicial Officers Conference, 2017 for HJS Officers to be held on 11th & 12th February, 2017 at IIIT, Jhalwa, Allahabad.**

Sir,

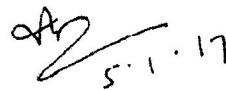
On the subject captioned above, I have been directed to inform you that the Hon'ble Court is organising the **State Level Judicial Officers Conference, 2017 for HJS officers, on 11th & 12th February 2017, at Indian Institute of Information Technology (IIIT), Jhalwa, Allahabad.** It is mandatory for all the HJS Officers to attend the conference.

The registration process will start at 8.00 AM on 11.02.2017 at the auditorium of IIIT. The conference will have two sessions on each day, namely pre lunch and post lunch sessions with a lunch break. A dinner will be arranged by the court on 11.02.2017. The participants will have to make their own lodging arrangements. Participants will be entitled to T.A./D.A. as per rules.


The registration form is attached herewith. The duly filled registration form shall be deposited at the counter at the time of registration.

I, therefore, request you to inform & circulate the registration form to all the HJS officers under your kind control. It is further requested that your good self along with these officers in your judgship shall ensure the presence in the conference.

Yours Faithfully,


(D.K.Singh-I)

Copy for information & participation to all the HJS officers posted on deputation.


(D.K.Singh-I)

High Court of Judicature at Allahabad

**State Level Judicial Officers Conference-2017
Allahabad On 11 & 12 February 2017.**

Please Affix Your
Passport size
Photograph

Registration Form

1-Name in Block Letters.....

2-Designation.....

3- Place of Posting.....

4-High Court id.....

5-Permanent Address.....

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6- Address for correspondence.....

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7-Mobile Number.....e-mail

8-Telephone Number (Residence).....(Official).....

9-Alternate Contact (In case of Emergency)

Name.....Relation.....

Address.....

.....

Mobile Number.....

Signature.....

Full Name.....

Received the Kit

Signature.....

Full Name.....