

## The Genius Lab knowledge preparation program Teacher Registration Form



Official Use Only  Maths Mastery Hub  ICT Pal  English Hub Re	acher gistration No :
Personal Details	
Full Name :	
Address :	
NIC No : Contact (Whatsapp) No :	
Date of birth : D D M M Y Y Y Y Age :	
Gender : Male Female	
Email Address :	
Gender : Male Female	
Email Address :	
Work status and position :	
I hereby confirm that the above details pertaining to myself.	
 Signature	 Date
Official Use Only	
The above mentioned teacher were enrolled for the Genius Lab Program.	
 Date of Registration	 Officer Signature