DOSSIER OF PERSONS TRAINED IN VARIOUS ASPECTS OF DISASTER MANAGEMENT (DM)

Name of the Department_____

Sr. No.	Particulars of the Officers/Officials who have received training in DM					Details of the Trainings/Courses Undergone/Attended		
	Name	Designation	Present place of Posting	e-mail address	Cell No.	Subject/Discipline	Institution	Duration
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)