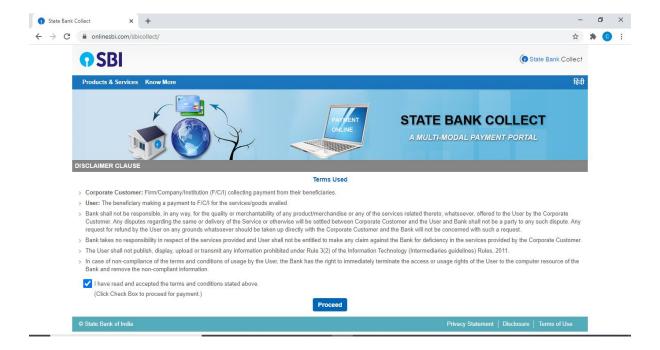
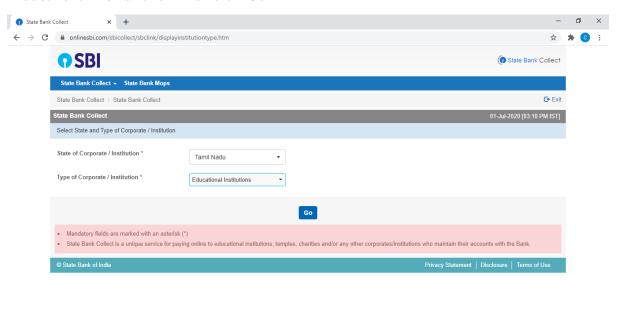
## Steps for National Virtual Conference on Food and Health Sciences: The Futuristic Outlook - Registration

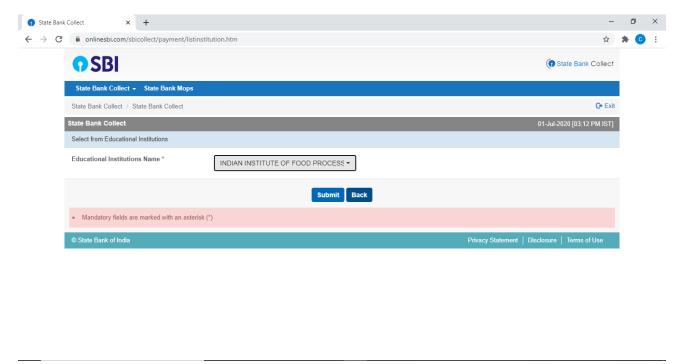
Step 1: Open SBI Collect in your browser. Link: <a href="https://www.onlinesbi.com/sbicollect/icollecthome.htm">https://www.onlinesbi.com/sbicollect/icollecthome.htm</a>
Accept the terms and conditions and click "Proceed"



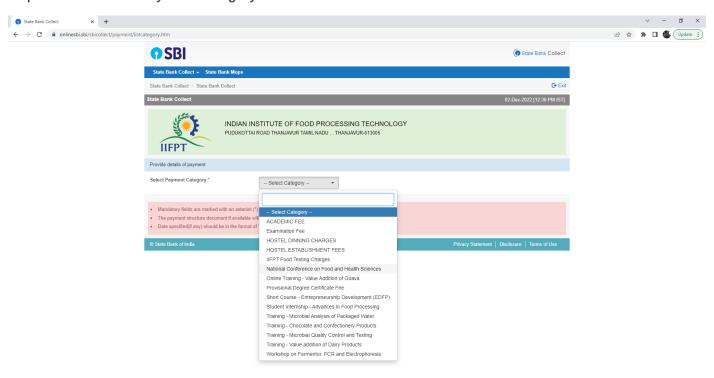
Step 2: Select "State of Corporate / Institution" as "Tamil Nadu" and "Type of Corporate / Institution" as "Educational Institutions". Then click "Go"



## Step 3: Select "Educational Institutions Name" as "INDIAN INSTITUTE OF FOOD PROCESSING TECHNOLOGY" and click "Submit".



## Step 4: select "Select Payment Category" as "National Conference on Food and Health Sciences "



Step 5: Fill the form with your details and proceed the payment

State Bank Collect				v - 0 X
← → ♂ • onlinesbi.sbi/sbicollect/payment/sh	owpayment details.htm			🖒 ☆ 🖈 🛮 🚯 Update 🚦
	<b>OSBI</b>		State Bank Collect	Í
	State Bank Collect - State Bank	Aops .		
	State Bank Collect / State Bank Colle	zt	<b>⊕</b> Exit	
	State Bank Collect		02-Dec-2022 [12:37 PM IST]	
		DIAN INSTITUTE OF FOOD PROCESSING TECHNOLOGY DUKOTTAI ROAD THANJAVUR TAMIL NADU , , THANJAVUR-\$13005		
	IIFPT			
	Provide details of payment			
	Select Payment Category *	National Conference on Food and Health Sciences ▼		
	Name *			
	Father Name *			
	Mobile Number *			
	Email ID *			
	Profession *			
	Organization *			
	Town/City *			
	State *			
	Conference Registration Fee *	1180 Fixed:Rs.1180		
	Remarks			
	Keep the Receipt Safely			
	• Reep tile Receipt Salety			
State Bank Collect      × +				v - 0 ×
← → C 🍨 onlinesbi.sbi/sbicollect/payment/sh				P ☆ 🖈 🗖 🚯 (Update :
	Organization *			
	Town/City *			
	State *			
	Conference Registration Fee *	1180 Fixed:Rs.1180		
	Remarks			
	Keep the Receipt Safely			
	Please enter your Name, Date of Birth (For Personal Banking) / Incorporation (For Corporate Banking) & Mobile Number. This is required to repirit your 4-receipt / remittance(PAP) form, if the need arises.			
	Name *			
	Date Of Birth / Incorporation *	<b>#</b>		
	Mobile Number *			
	Email Id			
	Enter the text as shown in the ima	je *		
		Select one of the Captcha options *		
		® Image Capticha ○ Audio Capticha  ★572X ②		
		portan e		
		Submit Reset Back		
	Mandatory fields are marked with a			
	The payment structure document if available will contain detailed instructions about the online payment process.  Date specified(if any) should be in the format of 'idmmrylyy'. Eg., 0282008  For Amount fields, only numbers are allowed and for free text fields (mandatory), following special characters are allowed / @ &			