



# ANNA UNIVERSITY

## AU TVS CENTRE FOR QUALITY MANAGEMENT



LUCAS - TVS LIMITED

### TQM FACTORY VISIT - JOURNEY TOWARDS EXCELLENCE

One Day Certificate Training Programme with 2 Factory visit  
22<sup>nd</sup> Feb 2018



#### Program Objective

- ✓ To evoke on appreciation that Total Quality Management (TQM) Journey has only a start point, and no destination.
- ✓ To create awareness on the methodology to transform the organization by rethinking and reworking its existing systems, processes, culture, communication, etc., which is inevitable for the very purpose of survival today.

#### Admission

- ✓ Restricted to 150 on First Come First Serve Basis. It will be 6 Batches of 25 Each.
- ✓ Delegate will visit 2 factories for Training & Plant Visit.
- ✓ Last date of Registration 15-02-2018.

**Delegates reporting time 7.30 am, Bus Starts @ AU TVS CQM, Anna University to Factory at 8.00 AM**

**Course Fee:** Rs.1, 500/- includes professional fee (Exclusive of TDS), Travel, Breakfast, Lunch, Certificate, etc.

NAME OF THE BANK	ACCOUNT NUMBER	IFSC CODE	CIF NO	MICR CODE
State Bank Of India (Anna University Branch)	10496976719	SBIN0006463	80390251156	600002039

**Certificate** will be awarded to all the participating delegates.

#	Company	Forenoon Batches 09.00 – 12.00		L U N C H	Afternoon Batches 02.00 – 05.00	
		Training	Plant Visit		Training	Plant visit
1	Lucas TVS	A			B	
2	Sundaram Clayton	B			A	
3	Sundram Fasteners	C			D	
4	Brakes India	D			C	
5	Wheels India	E			F	
6	Sundaram Brake Linings	F			E	

Contact +91-44-2235 – 8555 / 8623 / 8552 / 2047 Mobile No. +91 9965842238  
cqm.annauniv.edu / www.annauniv.edu

Enquiry: Kindly email your query with your phone number to autvscqm@annauniv.edu / autvscqm2015@gmail.com



## DELEGATE REGISTRATION FORM



Name (Mr. / Ms.) \_\_\_\_\_

Name of the Organization: \_\_\_\_\_ Designation: \_\_\_\_\_

Specify your identity document enclosed \_\_\_\_\_  
(Company ID /Pan Card/ Voters Id/ Passport/ Driving License/Aadhar card)

Products/Service of the Organisation \_\_\_\_\_

Academic Qualification: \_\_\_\_\_ Experience. (Years): \_\_\_\_\_

Address (Residence/Company): \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_ E-Mail: \_\_\_\_\_

### PAYMENTS DETAILS

**Course Fee:** Rs.1, 500/- includes professional fee (Exclusive of TDS), Travel, Breakfast, Lunch, Certificate, etc.

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Transaction No. \_\_\_\_\_ Amount: \_\_\_\_\_ Date \_\_\_\_\_ Bank \_\_\_\_\_

Signature with date

To:  
**The Director,  
AU TVS Centre for Quality Management,  
Anna University,  
Chennai – 25.**

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