

Systems Society of India

APPLICATION FOR LIFE MEMBERSHIP

(Affix Photograph here)

Application No.

Name (Mr./ Ms./ Dr./Prof.): _____

Date of Birth: _____ Nationality: _____

Academic Qualifications and Experience for Eligibility (Please Tick as applicable and fulfilled by you) :

ARTS	M.A.	M.Phil.	B.A. with 2 yrs. relevant professional experience
COMMERCE	M. Com.	B. Com. with 1 yr. relevant professional Experience	
EDUCATION	M. Ed.		B. Ed.
SOCIAL SCIENCES	M.B.A.	B.B.M. with 1 yr. relevant professional experience	
	B.A. (Social Science) with 2 yrs. relevant professional experience		
SCIENCE	M.Sc.	M.Phil.	B.Sc. with 1 yr. relevant professional experience
ENGINEERING	B.Sc.(Engg.) / B.Tech. / B. E.		M. Tech.
DIPLOMA HOLDERS	Diploma in Engineering with 3 years relevant professional experience		
MEDICAL	M.D.	M.B.B.S.	

Occupation (full particulars please) _____

MAILING ADDRESS _____ PIN _____

Tel _____ Mob. _____ e-mail _____

Membership fee enclosed : Rs. 1000/- Submitted to :Treasurer, _____ Chapter of SSI

Membership of other professional bodies: _____

Were you at any time in past member of the society? If yes, indicate period: _____

Place _____

Date _____

Signature

DECLARATION

The personal data given above is correct to the best of my knowledge and belief. If admitted as a member I undertake to be governed by the rules, regulations and bye-laws of S.S.I. as they stand at present or hereafter may be legally altered.

Place _____

Signature

SUPPORTERS

Name of Existing Member	Life Membership No.	Signature
1.		
2.		

(FOR OFFICE USE ONLY)

Membership No. Allotted on

Allocated to Chapter :

1. Aligarh 2. Bangalore 3. Calicut 4. Chandigarh 5. Chennai 6. Coimbatore 7. Dayalbagh 8. Delhi 9. Jaipur 10. Kanpur 11. Kharagpur 12. Lucknow 13. Ludhiana 14. Manipal 15. Noida 16. Secunderabad 17. Sikkim 18. Thiruvananthapuram 19. Visakhapatnam 20.Others

ACKNOWLEDGEMENT

Received from Mr./Ms. _____

application money for Life Membership of DEI-_____ Chapter – SSI by cash/cheque for Rs. 1000/-.

Application No.

Date _____

Treasurer, _____ Chapter-SSI