



# VASHISTHA INSTITUTE FOR NORTH BENGAL AND NORTH EAST DEVELOPMENTAL STUDIES

(Regd. No. S/94053)

## APPLICATION FORM FOR LIFE MEMBERSHIP

To,

The General Secretary/Director (Honorary)

Vashistha Institute For North Bengal And North East Developmental Studies (VINBNEDS), Vashistha  
Nagar, Vill.- Chhotolaukuthi, P.O.- Bakshirhat,

Dt.- Cooch Behar, (W.B.), India, Pin- 736131.

Mobile- 9474540386.

Sir,

I am willing to be a life member of Vashistha Institute For North Bengal And North East Developmental  
Studies and for this furnishing the necessary information along with the prescribed fee for the same  
here with.

Please consider all these.

With best wishes

Yours Sincerely,

## RELEVANT BIO-DATA

Affix stamp size  
authenticated  
photograph  
(if possible)

1. Name of the Applicant  
(In block/capital letters): \_\_\_\_\_
2. Father's / Husband's Name  
(Whichever is applicable): \_\_\_\_\_
3. Present Address (with Telephone No., Mobile No. & e-mail etc.):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Permanent Address (with Telephone No., Mobile No. & e-mail etc.):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Address for Communication (if any besides item 3&4):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Occupation (Give service designation with Name of the Institution / Present Place of Posting /  
Office Address If not self-employed):  
\_\_\_\_\_
7. Nationality \_\_\_\_\_
8. Religion \_\_\_\_\_
9. Sex \_\_\_\_\_
10. Caste \_\_\_\_\_
11. Date of Birth \_\_\_\_\_

12. Academic Qualifications\*

Name of the Examination	Year of Passing	Board / Council / University	Division / Class	Percentage of Marks
S.F. / Mdhyamik or equivalent				
H.S. / P.U. or equivalent				
B.A. / B.Sc. / B.Com. / Hons. equivalent				
M.A / M.Sc. / M.Com. equivalent				
M.Phil. or equivalent				
Ph.D.				
D.Litt.				
D.Sc.				
Others				

\* Not necessary to furnish in the case of the applicant serving or served higher educational institute or equivalent.

13. Information regarding Research Aptitude:

- (a) No. of Research Papers and Research oriented Books Published  
*(Please attach Separate sheets if necessary):*

Title of the Papers/Books	Name of the Journal with Vol. No. etc / publisher with year of publication etc/
_____	_____
_____	_____
_____	_____
_____	_____

14. Information regarding Social/Cultural Activities (if any) *[Please attach separate sheets if necessary]*

- (a) Are you already a member of any Institution of this type or equivalent, if so give the name and address

Name : \_\_\_\_\_

Address : \_\_\_\_\_

- (b) Description regarding the participation in Social/Cultural Activities *(Please attach separate sheets if necessary)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

15. No. of instalments in which the prescribed fee for life membership is likely to be given.

\_\_\_\_\_

\_\_\_\_\_

## DECLARATION

I do hereby declare that all the information given in this application are true to the best of my knowledge and belief.

Place:

Date:

Signature of the Applicant in full

## NOTES

- a) Present prescribed fee for life membership is Rs. 2000.00 (Two Thousand) only.
- b) This amount of fee is changeable in upward direction over time.
- c) This is to be paid/sent to the address of the General Secretary/Director (Honorary) of the Institute through I.M.O. or DD of SBI, or online to be drawn on SBI Sagolia Branch (8288) Dt. Dhubri, Assam, (A/C No: 11846032086).
- d) This fee may be paid in cash directly in the relevant section of the Institutes office during usual official hours in any working day.
- e) Another Stamp size authenticated photograph along with the information regarding identifying physical mark (to be furnished in separate sheet) may be sent if institutional Identity card is necessary.
- f) Acceptance of life membership fee will be furnished through the Acknowledgement of life membership.