

### NATIONAL INSTITUTE OF PERSONNEL MANAGEMENT

Southend Conclave, 3rd Floor, 1582, Rajdanga Main Road, Kolkata - 700 107 Phone: +91 33 2441 7254 / 7255, Fax: +91 33 2441 7256 Email: info@nipm.in Website: www.nipm.in

# INDIVIDUAL MEMBERSHIP

#### MADRAS CHAPTER

3E, Kasturi Apartment, Third Floor, 6th Street, Dr. Radhakrishnan Salai, (Opp. AVM Rajeswari Kalyana Mandapam), Mylapore, Chennai - 600 004. Tele: 2811 5599, E-mail: nipmcc@yahoo.com, Website: nipmmadras.org

	MEMBERSHIP -	SUBSCRIPTIONS	
	INCLUDING	G GST @18%	
Class of Membership Life Member	Annual Subscription	Entrance Fee (Joining only)	Total Payable at the time of joining Rs. 11800.00
Corporate Member	Rs. 1180.00	Rs. 590.00	Rs. 1770.00
Associate Member	Rs. 826.00	Rs. 354.00	Rs. 1180.00

Demand Draft / Cheque should be drawn in favour of "National Institute of Personnel Management"



## NATIONAL INSTITUTE OF PERSONNEL MANAGEMENT

Regd/ Office: 45, Jhowtala Road, 1st Floor, Kolkata - 700 019.

Address for communication: Southend Conclave, Tower Block (3rd Floor)

1582, Rajdanga Main Road, Kolkata - 700 107

Phone: +91 33 2441 7254 / 7255, Fax: +91 33 2441 7256

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# APPLICATION FORM FOR MEMBERSHIP (LIFE / CORPORATE / ASSOCIATE)

FOR OFFICE USE ONLY		Date of receipt of the application
		Date of receipt of the application
	tu	Entrance Fee and Advance Subscription Receipt NoDate
	lica	Admission Committee meeting held on
	App	Samuel Committee in County field on
	the Applicant	Recommendations of the Membership Admission Committee
	in by	If membership is not recommended the reasons there for
	d ii	www.morror.mp.to the recommended the reasons there for
OF	filled	
OR	to be	Admitted as a member by the National Council on
-	ot to	Membership No.
	Not	The short of the s
-		Chairman / Convenor, Membership Admission Committee Hony. General Secretary
	1.	Name in Full: Mr/Mrs/Miss
	526	(In block letters)
	2.	Mailing Address*
6		PIN
A	3.	Permanent Address
PERSONAL DATA		
NA		
380		
PE		PIN
	1	
	4.	Date of Birth (Date) (Month) (Year)
	5.	Telephone No.: (Office)Fax No. (Office)
	6.	Mobile No.: E-mail
	ш	
	NOTE	* Advice about any change in the mailing address in future should be communicated to the institute immediatly
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			Starting from graduation only:		
			Degree obtained University Year of obtaining the Degree		
ACADEMIC QUALIFICATIONS	General Education (copy of certificate required)				
		NOTE	If not a graduate, the last examination passed may be indicated here		
UALI	II		In Personnel Management, Industrial Relations, Labour Welfare and / or other allied subjects only		
MICQ	(pa		Degree or University or Year of obtaining Principal Subjects taken		
ACADE	Professional Education copy of certificate required)				
	ی	N.B	Certificates on Completion of a prescribed course of study from Central / State Government may also be included here		
	Α	1	For Employed persons only:		
EXPERIENCE / EMPLOYMENT RECORDS	Positions held at present	1. 2. 3. 4. 5. 6. 7. 8.	Present DesignationSince (Specify exact date)  Name and Address of the present organisation		
		8.	Information given In (6) above must be certified by the reporting authority		
		NOTE	organisation, employer's organisation etc.,  *** The figure should strictly relate to the establishment in which the applicant has been working in case he / she is concerned with more than one unit the total number of persons employed in such units may be given.		

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		П	For Consultants / Advert	isers etc. In Personnel Ma	ınagement, Industrial Rela	tions or Labour Welfare
1		1.	Name of the organisation	1 - 3		
		2.	Since when engaged in consultancy or advisory work (specify exact date)			
		3.	Nature of Services (in resonable details)			
			(Please attach separate sheet)			
	16	III	For Teachers / Researchers in Personnel Management, Industrial Relations or Labour Welfare			
		1.	DesignationSince (specify exact date)			
(penu		2.	Name and Address of Institution			
		3.	Nature of work and / or responsibilities (in reasonable details)			
conti						
EXPERIENCE / EMPLOYMENT RECORDS (continued)		4.	Subject of specialisation			
RE	В		Particulars	1	2	3
MEN		1.	Designation			
O.		2.	Duration (specify dates)	From	From	From
E / EMPI		3.	Name & Address of the	То	То	То
RIENC	present		organisation			
XPE	dat	4.	Nature of Business**			-
ш	Ĕ	5.	No. of persons employed		-/	
	Positions		in the establishment***			
	P	6.	To whom used to report			
		7.	Nature of duties & responsibilities			
1			(in reasonable details)			
		8.	Were you holding a management or adminitrative position?	Yes No	Yes No	Yes No
	** Nature of employer & business may be described in board terms such as Manufacturing, Mines, organisation, employer's organisation etc.,  *** The figure should strictly relate to the establishment in which the applicant has been working in a concerned with more than one unit the total number of persons employed in such units may be g				ng in case he / she is	

		N. C.			
ADD INFORMATION	NIPM MEMBERSHIP	Were you a Member earlier  Yes  No  If yes, please mention the category of Membership and Membership No.			
DECLARATION	By the Applicant	Member.			
		Date Signature of the Applicant			
	NOTE Demand Draft or Cheque should be drawn in favour of NATIONAL INSTITUTE OF PERSONNEL MANAGEM				
		This application form for membership of the Institute is from:  Mr. / Mrs. / Miss			
		Proposed by Seconded by			
NOMINATION		Signature Name in full			
		Address			
		Category of Membership*			
		Membership No.			
		Chapter			
		Remarks of the Chapter, if any			
0	)	*Both Proposer and Seconder must be CORPORATE / LIFE Members			