



MANOHAR PARRIKAR INSTITUTE FOR DEFENCE STUDIES AND ANALYSES
मनोहर पर्रिकर रक्षा अध्ययन एवं विश्लेषण संस्थान

Manohar Parrikar Institute for Defence Studies and Analyses

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Tel: 91-11-26717983, Fax: 91-11-26154192 Email: membership.idsa@nic.in

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Application for Membership (to be filled in Capital letters)

<p>To</p> <p>The Director General Manohar Parrikar Institute for Defence Studies & Analyses New Delhi-110010</p> <p>Sir,</p> <p>I hereby apply for Membership of the Manohar Parrikar Institute for Defence Studies & Analyses.</p> <p>2. I undertake that, if accepted, I will observe the rules and regulations governing membership of the Institute.</p> <p style="text-align: right;">Yours faithfully</p> <p style="text-align: right;">(Signature)</p> <p>Date</p> <p>Place.....</p> <hr/> <p>Would you like your application to be considered for Associate Membership if it is not accepted for Membership</p> <p style="text-align: center;">Yes <input type="checkbox"/> No <input type="checkbox"/> (Please tick as Applicable)</p>	<p>To</p> <p>The Director General Manohar Parrikar Institute for Defence Studies & Analyses New Delhi 110010</p> <p>Sir,</p> <p>I propose that.....be admitted as a member of the Institute. He/She has been personally known to me for about.....years.</p> <p style="text-align: right;">(Signature)</p> <p style="text-align: right;">..... (Name in Block Letters)</p> <p>Membership No. <input type="text"/></p> <p>Date</p> <hr/> <p>I second the proposal.</p> <p style="text-align: right;">(Signature)</p> <p style="text-align: right;">..... (Name in block letters)</p> <p>Membership No. <input type="text"/></p> <p>Date.....</p>
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(For Office Use)

Approval/Date of enrolment.....Membership No.....
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Particulars of the Applicant

1. Name
(Beginning with Surname in block letters)
2. Present position/Last position
held and name of the office
3. Address
(a)
.....
Pin Code.....Tel.....
Fax No.....Email.....

(b)
.....
Pin Code.....Tel.....
Fax No.....Email.....
4. Nationality
5. Date of Birth (dd/mm/yyyy)
6. Academic Qualification
(Add separate sheet if necessary)
7. Experience/Interest
(a) Field of study, teaching/professional
(b) Membership details of
Academic/Professional organizations.....
(c) Publications.....
(Add separate sheet if necessary)
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(a) Publications

Please indicate precisely the particular field of interest
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(b) Seminars and Conference
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1. Subscriptions are based on the financial year and become due for renewal on 1st April every year irrespective of the payment date. Please hand over the filled application form with a passport size colour photograph to the AD (Admn).
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3. Please Attach proof of residential address
4. Form should be proposed & seconded by the two Members or Life Members. Without proposed & seconded form should not be accepted
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