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**Indian Institute of Sustainable Development (IISD), New Delhi.**

**301-A, GF, Pocket-C Mayur Vihar, Phase –II, New Delhi -110091**

**Near Pink Line East Vinod Nagar/ Mayur Vihar-II Metro Station**

**Tel: - +91-11-35621562,** [**www.iisdindia.in**](http://www.iisdindia.in)

 **APPLICATION FORM FOR**

 **INDIVIDUAL LIFE MEMBERSHIP (NATIONAL)**

 **Photograph**

 **PERSONAL INFORMATION:**

* Salutation: Dr./Ms./Mrs./Mr.
* Name of the person: ……………………………………………………………………...
* Date of Birth: (DD/MM/YYYY)……………………………………………………………
* Nationality: Indian/ ……………………………Gender …………………………………
* State: …………………………………….. District: ………………………………………
* Detailed Address: ………………………………………………………………………………………………

 ………………………………………Pin Code: ………………………………………...

* Mobile Number: ……………………………………………………………………………
* E-Mail Id: …………………………………………………………………………………...
* Proof Attached *(Any* ***3 ID*** *{2+1})*: PAN\*\*/Aadhar\*\*/ Driving License /Voter ID/

 Passport.

 (\*\*ID’s are mandatory)

* Aadhar No. ……………………………PAN / DL No.……………………………..
* Passport No………………………………….Date of Expiry ……………………………
* Photograph (2) Attached: Yes / No *(It is Must)*
* Your Basic Area of Interest *(Specify)*: …………………………………………………..
* Any Project Currently Working on: ………………………………………………………

 **OFFICIAL INFORNMATION:**

* Name of the Associated Company / Institute / Organization:

…………....................................................................................................................

* Designation: ………………………………………………………………………………..
* Address: ……………………………………………………………………………………

 ………………………………………………Pin Code ……………………………………

* Total Year of Experience: ……………………Mobile No.……………………………….
* I Would Like to Apply for Individual (life) Membership of: IISD-CMI (
* Doing Payment Via: Cheque/DD/Bank Transfer

* Bank Details: Name of the Bank: …………………………………………………………

 Account Holder: …………………………………………………………….

 Account Number: …………………………………………………………...

 IFSC Code: ………………………………………………………………….

 Date of Transaction: ……………………………………………………….

* If through Cheque or Demand Draft:

 Account Holder: ………………………………………………………………..

 Cheque or DD Number: ……………………………………………………….

 Date of Transaction: ……………………………………………………………

\*\*Attach a Proof of the payment made (Transaction Slip), along with this Application Form.

\*\*Any **3 Identity proof (2+1)**. *(Aadhar\*\*/PAN\*\*/DL/Valid Indian Passport/Voter ID).*

*\*\*ID’s are mandatory.*

\*\* Must attach a *Brief Profile* of the Applicant in 350-400 words in 1- 2 Paragraph.

\*\*Send DD or Cheque in original.

\*\* Must attach 2 Impressive Photographs of any size.

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 DECLARATION

I am Dr. / Ms. / Mrs. / Mr. ………………………….. do hereby declare that, the information given above and in the enclosed data; is true to the best of my knowledge and belief, and nothing has been manipulated therein. I will be held liable as per rules and regulation of the Institute, if it is not found Correct. I have read, agreed, understood and accept the IISD-CMI’s Objective, Vison, Mission and Values, furnished at its website. I do assure to deliver my best.

Date: Signature:

Place: Name: