

Manohar Parrikar Institute for Defence Studies and Analyses
1, Development Enclave, Rao Tula Ram Marg, Delhi Cantt, New Delhi-110010
Tel: 91-11-26717983, Fax:91-11-26154192 Email: membership.idsa@nic.in

Application for Membership (to be filled in Capital letters)

Please Affix Your Photo Here

То	То					
The Director General Manohar Parrikar Institute for Defence Studies & Analyses New Delhi-110010	The Director General Manohar Parrikar Institute for Defence Studies & Analyses New Delhi 110010					
Sir,	Sir,					
I hereby apply for Membership of the Manohar Parrikar Institute for Defence Studies & Analyses.	I propose thatbe admitted as a member of the Institute. He/She has been personally known to me for aboutyears.					
2. I undertake that, if accepted, I will observe the rules and regulations governing membership of the Institute.		(Signature)				
Yours faithfully		(e.g.ratare)				
Tours faithfully	(Name in Block Letters)					
(Signature)	Membership No.					
Date	Date					
Place	Date					
	I second the proposal.	_				
		(Signature)				
Would you like your application to be considered for	(Nar	ne in block letters)				
Associate Membership if it is not accepted for Membership	(1.44)					
Wellbership	Membership No.					
Yes No (Please tick as Applicable)	Date					
(For Office Use)						

Approval/Date of enrolment......Membership No.....

Membership form receivedSubscription received on



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)					
		Tel				
	Fax No	Email				
4.	•					
5.	Date of Birth .	(dd/mm/yyyy)				
6.	Academic Qualification	(A.I.I				
7.	(Add separate sheet if necessary) '. Experience/Interest					
	(a) Field of study, teaching/pro	ofessional				
	ganizations					
	_	galizations				
	(c) Fublications	(Add separate sheet if necessary)				
8.	Activities of the Institute in which	n interested (Please put mark)				
	(a) Publications	Please indicate precisely the particular field of interest				
	(a) Tablications					
	(b) Seminars and Conference					
	(c) Research Projects					
9	Any other information that may be	pe of interest				
	10. If the Library facilities are desired: Please deposit Rs.5000/- as Security Fee refundable without					
	interest at the time of termination of Membership					

- Note: Subscriptions are based on the financial year and become due for renewal on 1^{st} 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).
 The annual subscription fee for Membership is 750/-.

 - 3. Please Attach proof of residential address.
 - Form should be proposed & seconded by the two Members or Life Members. Without proposed & seconded form should not be accepted