**INSTITUTE OF SCIENCE & TECHNOLOGY FOR ADVANCED**

**STUDIES & RESEARCH ALUMNI ASSOCIATION (ISTARAA)**

**APPLICATION OF MEMBERSHIP OF ISTARAA**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ would like to become a member (Fellow/Associate) of ISTARAA. I contribute ` \_\_\_\_\_\_\_ /- as a membership fee.

Date of Birth :

Year of joining and passing through ISTAR :

Further qualification obtained :

Discipline :

Current employment status (position and name of organization):

Contact : Mobile \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 E-mail ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office address :

Residential address :

* I enclosed herewith Cheque/D.D. of ` \_\_\_\_\_\_\_ /- towards membership fee
* Cheque/D.D. no. \_\_\_\_\_\_\_\_\_\_\_\_\_, Bank \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date \_\_\_\_\_\_\_
* I enclosed herewith my original fee receipt showing caution money deposit
* The crossed Cheque/D.D. may be in the name of DIRECTOR, ISTAR for Fellow Membership and Charutar Vidya Mandal for Associate Member