स्नातकोत्तर कृषि विज्ञान महाविद्यालय
(केंद्रीय कृषि विश्वविद्यालय, इम्फाल)
उमियाम, मेघालय – ७९३१०३
College of Post-Graduate Studies in Agricultural Sciences
(Central Agricultural University, Imphal)
Umiam, Meghalaya – 793103

APPLICATION FORM FOR MEMBERSHIP OF CPGSAS ALUMNI ASSOCIATION **SL. NO.: 0001**

To apply for a life membership, please fill this form and send it back along with a copy of receipt of payment paid through online banking to
Email ID: *cpgsasalumniassociation@gmail.com*

PERSONAL DETAILS

Title (Mr/Ms/Mrs/Dr): ..... **Date of Birth:** .....

First Name: ..... **Middle Name:** .....

Last Name: ..... **Nationality:** .....

Domicile: ..... **Religion:** .....

Marital Status: ..... **Gender:** .....

Category: .....

Present (Mailing) Address: .....

.....

Permanent Address: .....

.....

State: ..... **PIN Code:** .....

Mobile No.: ..... **Email ID:** .....

COURSE DETAILS

Degree (M.Sc/Ph.D): .....

Course Completed (Year): .....

Discipline Studied: .....

स्नातकोत्तर कृषि विज्ञान महाविद्यालय
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Umiam, Meghalaya – 793103

Batch (Year of Admission): .....

Year of Passing: .....

Occupation Details

Occupation: ..... **Designation**: .....

Organization: .....

Full Address of the Organization: .....

.....

Email ID (Office): .....

Work Experience: .....

Membership Details

Life Membership: *Rs. 2000/-*
Name: *Alumni Association, CPGSAS, CAU (I) Umiam*
Bank Name: *State Bank of India*
Account Number: *34943556969*
Account Name: *CPGSAS-ALUMNI*
IFSC Code: *SBIN0012464*

Fee Payment (Amount): ..... Mode of Payment:.....

Transaction Receipt No.: .....

Date: ..... **Bank Name & IFSC**: .....

Declaration

I hereby declare that the above information is true to the best of my knowledge.

Signature: .....

Date: .....

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For Office Use Only

Submitted Fee receipt: .....

Details provided are checked and verified: .....

Membership No.: .....

Valid from: .....

Enrollers Signature: .....

Date: .....