

Instrument Society of India

Department of Instrumentation, Indian Institute of Science, Bangalore – 560 012

Student Membership Form

Personal Details

Name of the Applicant:

Date of Birth: **Field of Study/ Research:**

Department:

College/Institution:

Town/City: **Pin Code:** **State:**

Telephone No. **Mobile No.**

Email:

*Please
Affix
a
Passport
Size
Photograph
Here*

Payment Details

Student Membership Amount Rs: 125/-

Mode of Payment: Cheque: **Demand Draft:** **Cash:**

Drawn on Bank:

Student Member Number (for office use only):

Declaration

I declare that the above given information is true as to my knowledge.

Date

Place

Signature of the Applicant

All Correspondence to be sent to:
General Secretary, Instrumentation Society of India, Indian Institute of Science, Bangalore – 560 012