

INSTITUTE OF LABOUR AND MANAGEMENT (ILM)

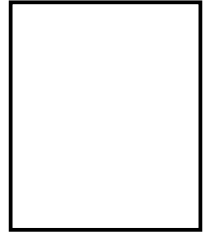
(Registered under the T.C.Literary Scientific and Charitable Societies

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ARRA 75, Avittom Road, Medical College.P.O

Thiruvananthapuram

Phone : 0471 2449957 Email:infoilm1999@gmail.com



APPLICATION FOR MEMBERSHIP

1	Name of applicant (In Capital Letters)	
2	AgeDate of Birth(AD).....	Gender Male/Female
3	Educational Qualification	
4	Official Address	
5	Permanent Residential Address(In Capital Letters)	
6	Telephone No (With STD) Email:	Mobile: 1) Mobile :2)
7	About Family: Mention name of spouse, son(s) and daughter(s) & their age	1) 2) 3) 4) 5)
8	Areas of Special Interest	
9	Positions held, if any, in trade union/social/cultural organisations	
10	Other remarks	
I hereby declare that the particulars/information given above are true and correct and that I will abide by the Rules and by-laws of Institute of Labour and Management, inforce from time to time. Please enrol me as a member. Fee remitted Rs. 3000/- by cash/cheque No.....		
Place:	Date:	Signature of the applicant

For Office Use

Admitted as member

Executive Director

Chairman/Vice Chairman