



To  
The Honorary General Secretary  
Indian Society of Ergonomics (ISE)

Dear Sir,

I, \_\_\_\_\_ (name of the applicant) am interested to become  
a Life / Student \* member of your Society.

I am sending herewith by a Cheque/ Demand Draft/ Money Order/ Cash\* the sum  
of Rupees \_\_\_\_\_ being my Life membership fee /  
subscription for the year 20\_\_ - 20\_\_, including Rupees \_\_\_\_ as the admission fee\*.

I have read the rules and regulations of the Society and I shall abide by them, if I  
am elected a member. I am enclosing the particulars of my relevant bio-data.

Kindly acknowledge receipt of this application and the money sent, and inform me if  
I am elected a member.

\* delete words not applicable

Dated \_\_\_\_\_ (Signature of the applicant)

(Name in Block letters as desired on Certificate, Receipt, etc.)

**Please attach:**

1. Datasheet (Annexure I)
2. Biodata / Resume
3. A short justification (about 250 words) for admission to the Society
4. Payment
5. Passport sized Photograph – 2 copies (or scanned jpeg file)

**Details of payment:**

Cash / MO/ Cheque/ Draft No. \_\_\_\_\_ Dated \_\_\_\_\_  
for Rupees \_\_\_\_\_ (in figures) \_\_\_\_\_ (in words)  
on \_\_\_\_\_ ( bank) \_\_\_\_\_ (branch) is enclosed.

Cheques and Drafts to be issued in favour of "**Indian Society of Ergonomics**"

Please send a Crossed Bank Draft or Cheque (local or pay-at-par) in the name of  
"Indian Society of Ergonomics" payable at any bank in Kolkata. Please add Rs.100  
for out-station (non-Kolkata) cheques of scheduled banks towards bank charges .

## Indian Society of Ergonomics

### Datasheet for New Members

First Name	
Middle Name	
Last Name	
Date of Birth	
Title (Dr./ Prof./ Mr./ Ms.)	
Designation	
Nationality	
Institution	
Office Address	
Office email(s)	
Office Phone(s)	
Home Address	
Home email(s)	
Home phone(s)	
Preferred address for Correspondence by email	Home / Office (select one)
Preferred address for Postal Correspondence	Home / Office (select one)
Names (with number) of three existing ISE members who can certify his/ her candidature	1. 2. 3

Following items to be filled in by ISE after registration

Date of Receipt \_\_\_\_\_ Date of Payment credit \_\_\_\_\_  
 ISE Membership No. \_\_\_\_\_ Date of Acceptance \_\_\_\_\_

Remarks: