

<input type="checkbox"/> Demand draft	Bank: DD Number:	Branch: Date:
<input type="checkbox"/> Online transfer*	Bank: Name of the Sender's A/c: Transaction ID:	A/c No: Date:
<input type="checkbox"/> Cash receipt*	Given to: Receipt Number:	Date:
<input type="checkbox"/> Cash deposit*	Branch: Date:	

* attach copy of counterfoil/receipt/acknowledgment

Attach a copy of your medical M.Sc degree certificate issued by the university (at convocation)

Undertaking by the applicant

I have gone through eligibility criteria for membership and I shall abide by the Rules and Regulations (including bylaws) of the association.

Signature:..... Date: :..... Place:

(Office purpose only)

Recommendation by the Scrutinizing Committee

I have verified the information given in this application and the supporting documents are true to the best of my knowledge. She/he fulfils the eligibility requirement for becoming member of the Association. Hence, I recommend that be accorded the membership of the National M.Sc Medical Teachers Association.

Name:..... Signature: Date:

Confirmation of membership and registration number

Membership of the applicant has been: approved /rejected on date:

Reasons for rejection:

Membership number:

Treasurer: General Secretary: Date:

* The life membership of the Association shall be confined to those who have postgraduate qualification (medical M.Sc degree) in any of the following disciplines: Anatomy, Physiology, Biochemistry, Pharmacology and Microbiology conducted by any medical college/institution (recognized by Medical Council of India for conducting either MBBS or MD/MS course) awarded under the faculty of medicine.