



ACADEMIC LIBRARY ASSOCIATION

Reg. No. TSR/TC/267/2014; Office: 16/1875, Penta Street, Pananchakom
Mannuthy Post, Thrissur – 680 651, Kerala, India
e-mail: alakerala@gmail.com; Phone: 9496839409; 9995087645

APPLICATION FOR MEMBERSHIP

1. Name in full (in capital letters):
2. Sex / Age / Date of Birth : Male/Female/.....years/.....
3. Qualifications (General) :
- : PhD in LIS* Yes/No University.....
- : MLIS* Yes/No University
- : BLIS* Yes/No University
- : DLIS/CLIS* Yes/No University/Board
4. Residential Address :
-Pin Code:.....
5. If employed, official Address :
-Pin Code:.....
6. Professional experience in years:7. E-mail ID:
8. Mobile No.Land line with STD code
9. Membership other Professional Associations?

DECLARATION

I, hereby apply for **Associate / Life Membership** of the Association and undertake to abide by the rules and the bye-laws of the Association if I am admitted to the Association. A sum of Rs 100/- is forwarded herewith by **Cash/DD/Electronic Payment** being the Membership Fee.

Place :

Date :

Signature of Applicant

Proposed by:

Sign:

For Office use only / General Secretary's Report

Placed before the ALA-EC meeting held onand approved/rejected the Application.

General Secretary

President

**DD/ Electronic Transfer in favour of "Academic Library Association", SBT, Ollukkara Branch,
(Branch Code: 70210) Mannuthy, Thrissur, A/c. No. 67277881745; IFS Code: SBTR0000210**

* **Please attach a copy of any Certificate in LIS (PhD-LIS/MLIS/BLIS/CLIS)**