



Regn No. : S-34749

**SINDHI COUNCIL OF INDIA**

سنڌي ڪائونسل آف انڊيا

**सिंधी काँउन्सिल ऑफ इंडिया**



Head Office: 14, Golf Apartment, Golf Links, Maharishi Raman Marg, New Delhi-110003, Tel: 011-46570303

## **APPLICATION FOR ACTIVE MEMBERSHIP/ LIFE MEMBERSHIP**

Date: .....

### **Notes:**

- 1** This application should be submitted with three coloured passport size photographs of the applicant and a crossed cheque on a local bank covering the fees applicable for one of the following classes of membership.
  - a)** Active Membership
  - b)** Life Membership
  - c)** Original founder member/ Life member/ Ordinary active member
- 2** Please obtain Registration number of your application and receipt for the amount at the time of submitting this application in the office. The confirmation of your membership will reach you after the same is approved by the national level Sindhi Council of India.
- 3** Kindly quote your Regd. No. in all future correspondence with the Sindhi Council of India at all three levels i.e. local level, Regional level or National level.
- 4** Please attach your Bio-Data giving the additional details of your social status, standing, and record of achievements in any fields of activity, briefly indicating your Career Plan/ long term objectives and willingness to avail business opportunities/ service opportunities giving details of areas of preferences and locations within the country/ Abroad.
- 5** The information provided will be kept in the Confidential Data Bank. This information may be used at the discretion of the Council for the benefit of the members and the Council which stands indemnified in all respects in the event of the use of the said confidential information.

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**Twin objectives: Progress during 21st Century with a Mission & Pursuit of Excellence.**



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**SINDHI COUNCIL OF INDIA**

- 1 I wish to become Active/Life Member of the Sindhi Council of India. I \ hereby agree, if elected, to become such member and to be bound by the Memorandum and Articles of Association and by the Bye Laws of the Sindhi Council of India.
- 2 In case I am elected a member, I agree to accept my share of responsibility in the council and abide by the rules framed for such responsibility from time to time.

**Full Name (Block Letters) :** .....

**Sex :** .....

**Father's/ Husband's Name :** .....

**Date of Birth :** MM...../DD...../YY..... **Place of Birth**.....

**Age :** Year.....Month.....

**Nationality :** .....

**Place of origin of Forefathers in Sindh :** .....

**3 Profession or Occupation :**

(a) If in State or Union Government Service : .....

(Civil or Defence) state current Designation .....

rank, Ministry or department of Government .....

Post held, regiment or unit : .....

(b) If in Business, or in Private Service state name of Company .....

or firm, applicant's current position in it, nature of its business .....

and name of the senior most member of such firm, company .....

or Association in India or abroad .....

(C ) in any other case, state nature of profession .....

or occupation or service/ calling : .....

**4 Office Address :** .....

**Telephone No. :** ..... **Mobile No. :** .....

**E-Mail :** .....

**5** Permanent Address : .....

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**6** (a) List all the Institutions such as University, .....  
Colleges or Schools attended with Years .....

(b) List all the skills and areas of specialty or experience .....  
(Please use extra paper if required)

**7** Married or Single : .....

Name of the Spouse ..... Age .....

His/ Her Father's Name : .....

Profession/ Occupation : .....

**8** If Married, children as on date with their names, ages & marital status location i.e. school, college, in service, profession or in business: Please use separate sheet of paper to provide exhaustive information on the carrier plan/ ambition of children .....

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**9** Name of other clubs, councils, Associations or political party of which applicant is a member. (In case you had resigned or your membership had been terminated by any association or/ Club/ Political Party please indicate details).....

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**10** Date : .....

**11** Place : .....

**12** In case Applicant is not an existing ordinary member/ life member/ founder member:

a) Proposed by : .....

b) Seconded by : .....

**Signature of applicant**