



APPLICATION FORM

institutional member R E G I O N A L

(Please tick whichever is appropriate)

The Regional Director
Confederation of Indian Industry
(Northern Region)
Block No 3, Dakshin Marg
Sector 31-A
Chandigarh - 160 047

The Regional Director
Confederation of Indian Industry
(Eastern Region)
6, Netaji Subhash Road
Kolkata - 700 001

The Regional Director
Confederation of Indian Industry
(Southern Region)
Prof C K Prahalad Centre
98/1, Velachery Main Road
Guindy, Chennai - 600 032

The Regional Director
Confederation of Indian Industry
(Western Region)
105, Kakad Chambers
1st floor, 132, Dr Annie Besant Road
Worli, Mumbai - 400 018

Dear Sir,

We wish to apply for CII Institutional Membership. The Application Form, duly completed, is submitted along with the relevant supporting documents.

Kindly acknowledge receipt of the above and confirm our Institutional Membership.

Yours faithfully,

(Signature)

Date

Name	
Designation	
Institution	
Address	

N.B. : This application should be proposed and seconded by two existing CII members (Authorised Signatory with Company stamp).

Proposed by

Signature	
Name	
Designation	
Company	
City	

Seconded by

Signature	
Name	
Designation	
Company	
City	



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(Please fill in block letters)

1. Name of Institution : _____

2. Year established : _____

3. Address : _____
 (If you have other offices in India, please attach their complete addresses)

 Telephone : _____
 Fax : _____
 Email : _____ Website : _____

4. Date and number of registration under Societies Registration Act (any other authority) : _____

5. Name & address of President/Vice President : 1) _____
 Or
 Chairman/Vice Chairman 2) _____

6. No. of permanent/temporary staff on your roll : _____

7. Does the Institution have a Provident Fund Scheme and Gratuity Scheme for staff ? : _____
 If so, please give details

8. Total number of members : _____

9. Annual budget : _____

10. Name of Chief Executive of Institution : _____

11. Name & designation of person for liaison with CII : _____

We hereby give our consent to abide by the Rules and Regulations of the Confederation.

Signature	Name
_____	_____
Date	Designation
_____	_____

Note

- Please enclose the following documents :
- Memorandum and Rules of Institution
 - Copy of Registration Certificate
 - Note on Annual Membership Subscription of your Institution
 - List of Governing Council (together with addresses) of your Institution
 - Last annual report and audited accounts of your Institution
 - List of activities held last year and proposed for the current year
 - List of Members
 - Cheque/Demand draft for Rs 1,000/- towards Entrance fee and Rs 15,000/- towards annual subscription (Service Tax 15% extra) favouring "Confederation of Indian Industry".
 - A brief note on how your Institution would benefit from CII membership.
 - Some publications brought out by the Institution.

FOR OFFICE USE ONLY

Meeting Approval Date : _____

Membership No. : _____