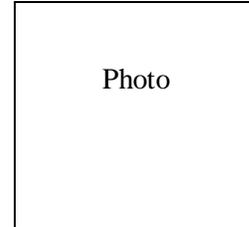


MEMBERSHIP FORM

To,
The Chairman
KNOWLEDGE REVIEW
8/1/2- Dr. U.N. Brahmachari Street, Kolkata-700017



Dear Sir/Madam,

I am seeking to be a Life Member of KNOWLEDGE REVIEW. I am committed to follow the rules and regulations of the organization.

- (i) Name:
- (ii) Father's name:
- (iii) Mother's name:
- (iv) Sex:
- (v) DOB:
- (vi) Aadhaar no:
- (vii) Designation:
- (viii) Affiliation:
- (ix) Area of research interest (if any):
- (x) Address:

- (xi) Contact no:
- (xii) WhatsApp no:
- (xiii) E-mail Id:
- (xiv) Highest qualification:
(enclosed xerox)

Place:

Date:

(Signature of the candidate)