

# THE INSTITUTION OF ELECTRONICS AND TELECOMMUNICATION ENGINEERS

2, Institutional Area, Lodhi Road, New Delhi-110003.

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#### **UNDERTAKING**

AMIETE-(ET/ CS / IT)
(Please tick one)

| Membership No. SG                                                                                                                      | June or Dec :                           |
|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| r                                                                                                                                      | (Completion Year)                       |
| 1. I (Name)have complete June or Dec (year)examination.                                                                                | ed AMIETE (Stream) during               |
| 2. I <b>do not want</b> to appear for improvement in any subtill                                                                       | ject and my membership is valid         |
| 3. I understand that once <b>Provisional Certificate</b> / <b>ConCertificate</b> is issued to me, I will not be eligible to appear for |                                         |
| Tel./ Mobile No                                                                                                                        | (Signature of the Candidate)            |
| E-mail Id                                                                                                                              | (Signature of the Candidate) Date:      |
| (Please write own address in capital letters with pin code nur                                                                         |                                         |
| PIN                                                                                                                                    |                                         |
| Enclosed :- Bank Draft No                                                                                                              | v.e.f. 01.01.2018 inclusive of 18% GST) |
| Name of the Bank                                                                                                                       |                                         |
| On Line Payment Trxn Id/Cash receipt No.:                                                                                              | Date:Rs                                 |
| Dispatched details: { For Office Use Only }                                                                                            |                                         |
| Provisional Certificate Nodatedby                                                                                                      |                                         |
| Final Grade sheet Nodatedby                                                                                                            |                                         |
| Final Cartificate No. doted by                                                                                                         | Action taken by                         |



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## APPLICATION FOR TRANSFER FROM STUDENT TO 'ASSOCIATE MEMBER' (FOR AMIETE PASSED STUDENTS ONLY)

| Membership No.: SG                                                                                                                                                                                                                                                                                                                     |                                                                                                                                            | Roll No                                                                                                                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| AMIETE Exam Passed in June/Dec                                                                                                                                                                                                                                                                                                         | (Year)                                                                                                                                     | Stream – (ET/CS/IT)                                                                                                                            |
| Name:                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                            |                                                                                                                                                |
| Fathers Name                                                                                                                                                                                                                                                                                                                           |                                                                                                                                            |                                                                                                                                                |
| Address:                                                                                                                                                                                                                                                                                                                               |                                                                                                                                            |                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                            |                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                            | PIN:                                                                                                                                           |
| Payment details against application fee, trans                                                                                                                                                                                                                                                                                         | sfer fee and membership:                                                                                                                   |                                                                                                                                                |
| Bank Draft NoDate                                                                                                                                                                                                                                                                                                                      | Rs. <b>5310</b> /- (w.e.f. 01.0)                                                                                                           | 1.2018 inclusive of 18% GST)                                                                                                                   |
| Name of the Bank                                                                                                                                                                                                                                                                                                                       |                                                                                                                                            |                                                                                                                                                |
| On Line Payment Trxn ID/Cash receipt No. :                                                                                                                                                                                                                                                                                             | Dat                                                                                                                                        | e:Rs                                                                                                                                           |
| DECLARATIO                                                                                                                                                                                                                                                                                                                             | N BY THE CANDIDAT                                                                                                                          | <u>re</u>                                                                                                                                      |
| I declare that the above information is accura<br>Nationality. I further agree that in the even<br>INSTITUTION OF ELCTRONICS AND<br>governed by the Constitution as it is now, of<br>the objects of the Institution as far as shall be<br>writing to the Secretary General that I am de<br>the payment of any arrears which may be due | t of my election to ASS<br>TELECOMMUNICATIOn<br>that it may hereafter be a<br>the in my power, provided the<br>estrous of withdrawing from | OCIATE MEMBER OF THE ON ENGINEERS, I will be lered, and that, I will advance hat whenever I shall signify ir om the Institution. I shall after |
| Tel/Mobile No                                                                                                                                                                                                                                                                                                                          |                                                                                                                                            |                                                                                                                                                |
| E-mail ID:                                                                                                                                                                                                                                                                                                                             |                                                                                                                                            | (Signature of the Candidate) Date:                                                                                                             |
| FOR OF                                                                                                                                                                                                                                                                                                                                 | FFICE USE ONLY                                                                                                                             | <b>Dute</b>                                                                                                                                    |
| 1. Completion No Stream                                                                                                                                                                                                                                                                                                                | PC Issued on                                                                                                                               | . by                                                                                                                                           |
| 2. Final Grade sheet No                                                                                                                                                                                                                                                                                                                | Dispatched on                                                                                                                              | . by                                                                                                                                           |
| 3. Original Certificate No                                                                                                                                                                                                                                                                                                             | Sent / Issued on                                                                                                                           | by                                                                                                                                             |
|                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                            | Action Taken by                                                                                                                                |



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### **IMPORTANT**

### TO BE FILLED IN BY THE MEMBERS WHO OPT FOR LIFE MEMBERSHIP OF THE INSTITUTION

(The Life Membership Card will be issued to members on receipt of Full Life Membership Fee)

| Please paste y<br>photograph ar<br>box provided     | nd m      |             |             |           |       | the         |           |           |         |         |       |         |       |         |         |     |   |          |         |           |           |         |         |
|-----------------------------------------------------|-----------|-------------|-------------|-----------|-------|-------------|-----------|-----------|---------|---------|-------|---------|-------|---------|---------|-----|---|----------|---------|-----------|-----------|---------|---------|
|                                                     |           |             |             |           |       |             |           |           |         |         |       | P       | hot   | togr    | aph     | 1   |   | Sig      | gnat    | ture      |           |         |         |
| Class and Men                                       | bers      | hip]        | No.         |           |       |             |           |           |         |         |       |         |       |         |         |     |   |          |         |           |           |         |         |
| Class and Men<br>(To be filled in<br>in case of new | joini     | ne o<br>ng) | Пісе        |           | Cat   | egory       |           |           | ]       | Mem     | bers  | hip N   | No.   | I       |         |     |   |          |         |           |           |         |         |
| Name:                                               |           |             |             |           |       |             |           |           |         |         |       |         |       |         |         |     |   | <u> </u> | 1       |           | T         |         |         |
| tuille.                                             |           |             |             |           |       |             |           |           |         |         |       |         |       |         |         |     |   |          |         |           | <u> </u>  |         |         |
| (as should appear in                                | your      | life m      | embei       | rship     | card, | maxin       | num 2     | 5 cha     | racte   | ers in  | cludi | ing s   | pace  | es)     |         |     |   |          |         |           |           |         |         |
| Date of Birth:                                      |           |             |             |           |       |             |           |           |         |         |       |         |       |         |         |     |   |          |         |           |           |         |         |
|                                                     | D         | D           | M           | M         | Y     | Y           | Y         | Y         |         |         |       |         |       |         |         |     |   |          |         |           |           |         |         |
| Address:                                            |           | • • • • •   |             |           |       |             |           |           |         | • • • • |       |         | •••   | • • • • | • • • • |     |   |          |         | • • • •   |           | • • • • |         |
|                                                     | • • • • • |             |             |           |       |             | • • • • • |           | • • • • | • • • • |       |         | • • • |         | • • • • |     |   |          | • • • • | • • • • • |           |         | • • • • |
|                                                     |           |             |             |           |       |             |           |           |         |         |       |         |       |         |         |     |   |          |         |           |           |         |         |
| • • • • • • • • • • • • • • • • • • • •             | • • • • • |             | ••••        | • • • • • |       | ••••        | • • • • • | • • • • • | • • • • | • • • • |       | • • • • | • • • | • • • • | ]       | PIN | : | • • • •  | • • • • | ••••      | • • • •   |         | • • •   |
| Telephone: (O                                       | ff)       | • • • • •   |             |           |       |             |           |           |         | . (R    | es)   |         |       |         |         |     |   |          |         |           | . <b></b> |         |         |
| Mobile No:                                          |           |             | • • • • •   |           |       | • • • • •   |           |           |         | . Fa    | ıx N  | Jо      |       |         |         |     |   |          |         |           |           |         |         |
| E-mail ID:                                          |           |             | • • • • • • |           |       | • • • • • • |           |           |         |         |       |         |       |         |         |     |   |          |         |           |           |         | •••     |