

KARNATAKA SOCIOLOGY ASSOCIATION (R.)

Office address: Department of P-G Studies and Research in Sociology
 Kuvempu University, Jnana Sahyadri Campus, Shankaraghatta-577451.
 Shimoga Dist. Karnataka. Web site: <https://www.kassocassn.com>

MEMBERSHIP APPLICATION FORM

(See guidelines, rules and fee structure for detail)

01	Name in block letters	:				
02	Name and designation of Institution where you are employing/studying (with official address)	:				
			Pin Code:			
03	Permanent address	:				
			Pin Code:			
04	Date of birth	:		Nationality :		
05	Mobile No:	:				
06	E-mail	:				
07	Sex	:	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
08	Caste / Category	:				
09	Educational qualification	:				
	Degree		University	Year	Major Subject / Topic	
	Graduation					
	Post Graduation					
	M.Phil.					
	Ph.D					
10	Type of Membership applied for :					
	i. Life Member	Indian	<input type="checkbox"/>	Foreign	<input type="checkbox"/>	
	ii. Ordinary Member	Indian	<input type="checkbox"/>	Foreign	<input type="checkbox"/>	
	iii. Student Member	Indian	<input type="checkbox"/>	Foreign	<input type="checkbox"/>	
11	Details of membership Fee Paid / Mode of payment					
	Date	Amount	By cash	Net banking (Mention UTR No.)	QR Code Scanning (Mention UTR No.)	If remit cash in Bank mention challan No. and Bank details

I declare that the information provided in this application form are true to the best of my knowledge and belief. I have read the Rules and Regulations of the Association and agree to abide by them.

Date:

Full signature

For use by Karnataka Sociology Association office

Membership No.	Amount	Receipt No.	Date