

**INDIAN INSTITUTE OF SECURITY MANAGEMENT
(MADRAS CHAPTER)**

(REGN. No. 317/1985 UNDER TAMILNADU SOCIETIES REGISTRATION ACT XXVII OF 1975)
C/o. Globe Detective Agency P Ltd., 'Agurchand Mansion', #152, Anna Salai,
Chennai - 600 002.

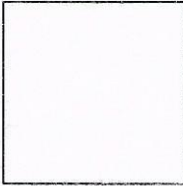
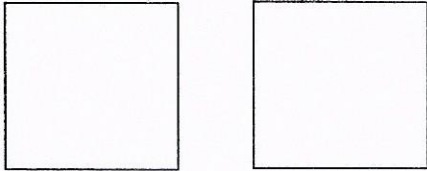
Email ID: iismgroups@gmail.com

Website: www.iismmc.com

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APPLICATION FOR MEMBERSHIP (INSTITUTION/PATRON)

(Please read the note at the end for instructions)

1. Name of Institution :
2. Details of the Head of the Institution :
Name Designation:
Qualification (Academic / Professional):
Phone No. :

3. Registered Address :
4. Mailing Address :
5. E-mail ID / Website :
6. Nature of Business :
7. Year of Establishment : No. of Personnel Employed:
8. Name of Persons Nominated (i)
As Representatives (ii)
9. Recent Passport Size Photo of the representative :

10. Designation of the representatives (i)..... (ii)
11. Date of Birth (i)..... (ii)
12. Qualification - Academic / Prof. (i)..... (ii)
13. Contact Nos. Of Representatives : Off: Off:
Res: Res:
Mob: Mob:

(Note: Any subsequent changes of the particulars furnished above shall be intimated by the head of the institution, to the secretary IISM.)

Please give Two references belong to IISM:

Name : Name :
Address : Address :
Mobile No : Mobile No :

PAYMENT DETAILS

Name of the Applicant (Institution):

Mode of Payment with details (Bank Name with Place):

DD / Cheque No. : Date:

NEFT detail:

CERTIFICATION

I hereby certify that all entries made by me in this application process are true, complete and correct to the best of my knowledge.

Place :

Date :

.....
.....

Signature Of The Applicant

FOR OFFICE USE ONLY

Application Proposed By Seconded by

Received on :

Membership No :

Certificate dispatched on

Hony.Treasurer

Hony.Secretary

Hony.President

INSTRUCTIONS AND ENCLOSURES:

- *USE CAPITAL LETTERS ONLY.
- *Copy of the Certificate of Incorporation /Registration. (Self-Attested).
- *Copy of Licence issued by the Govt .of TN. (For Security Agency) (Self-Attested).
- *One Passport size photo of Head of the Institution.
- *One Passport size photo each, of two Representatives.
- *Copy of Certificate of Qualification Of Head Of Institution. (Self-Attested).
- *Copy of Certificate of Qualification Of the Representatives. (Self-Attested).
- *Payment of Fees by DD as applicable.(Rs.5000/- Five Thousand Only).
- *Bank Details: DD / Cheque to be drawn in the name of "INDIAN INSTITUTE OF SECURITY MANAGEMENT (Madras Chapter)" payable at Chennai.
Indian Bank, Nungambakkam, A/c no. SB 419333300
IFSC No. IDIB000N033 CBS Code: 00088