

ASSOCIATION OF KERALA GOVERNMENT COLLEGE TEACHERS
Application for membership

Name of Applicant :

Age and Date of Birth :

Date of entry into College Service :

Previous service, if any, give
Details :

Qualifications :

Designation :

Faculty :

Official Address with PIN code :

Home station :

Residential Address with PIN :

Phone (Land) :

(Mobile) :

Fax :

e-mail ID :

Permanent address :

Marital status : Single/ Married

If spouse is employed, details :

Declaration

I Hereby declare that I will be faithful to the constitution of the Association of Kerala Govt. College Teachers and shall abide by the policies and programmes formulated by the Association from time to time.

Date:

Signature

Recommendations of the Unit Secretary

Remarks of the General Secretary