**Personal/Individual Membership Form : (All details are mandatory)**

Educationists /  Scientists / Industry Delegates OR

Research Scholar (Ph.D / M.S./M.Phil) OR Master/Bachelor level Student

Membership Term:- 5 Years / 10 Years / Life Time (select any 1 as per your choice)

FULL NAME :- Main Name - Middle Name - Family Name

Educational Qualification :-

Designation (If any):–

Department / Faculty :-

Affiliated Institute / Industry :-

Affiliated University/ Organization :-

Office Email :-

Personal Email :-

Contact No. : – (Personal) -

(Office) -

Total Years of Educational Experience :-

Total Years of Industrial Experience :-

Full Home Address with Postal code/ Zipcode :-

**Area of interest / expertise**:

**Research Work Publication / Participation: (Only mention number / If not - NA)**

Number of Research PAPERS / ARTICLES in Journals :-

Number of Research PAPERS / ARTICLES in Conference/ Seminars :-

Number of Conference/ Seminars / Workshop attended :-

Number of Research PAPERS / ARTICLES in Edited Book :-

Number of Books Published (Your own):-

**Short Biography** (around 500 words) –

**Achievements / Received Awards: (If any)**

**Provide your online profile links here:** (Mandatory - if any)

Your profile on your university/ institute/ own website/ blog page (if any):-

Google Scholar :-

ResearchGate :-

Academia :-

SSRN :-

LinkedIn :-

Any other link which showing your research work details (if any) :-

I have read terms, norms, regulations of “Research Culture Society” to join as a member and submit here my fact details with Identity proof and membership fee copy documents. I ensure and agree that I will never file any legal claim or any action in/on any matter against “Research Culture Society” or its head authority persons. I also know that membership is to about to join research community and paid membership fee is not being refundable or transferable.

PASSPORT SIZE PHOTO

E-SIGN (jpg/png):–

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Date:- / /

**Paste here your - identity proof and Address proof copy ( jpg / png file ) here**

**(Citizenship Card, Passport, Service Card, or any other proof – with Photo and Address)**

**Paste here your - Membership Payment proof copy : (jpg / png file)**

**INSTRUCTIONS:-**

**Send below 3 documents as email attachment to :-** director@researchculturesociety.org

1. **this form as M.S. word format with passport size photo copy,**
2. **membership fee payment slip copy (as - jpg/png/pdf)**
3. **Any 1 identity proof (College/University ID card/Company ID card/ Voter card/ Driving License/ Any other official government / citizenship ID card ( as jpg/png/pdf)**

Note: Candidate can add scanned e-signature as jpg./png. file in this form.