**Membership form of IJSRG**

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* Specialization: ......................................................................................................................
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* Teaching Experience (if any): ...............................................................................................
* Membership of other Bodies:................................................................................................
* Subject of Main Research:.....................................................................................................
* Research Experience:.............................................................................................................
* Topics of Research Interest: .................................................................................................
* Paper’s Published in (ISI) Impact Factor or any others:.......................................................
* Paper Presentation in Conferences/Seminars/Symposia:

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Has read and understand the rules and regulations of the membership of IJSRG and I accept to follow all conditions printed in this form.

Date.......... Sign of the Applicant………..……….

Name of Applicant…………….……..