



MEMBERSHIP FORM

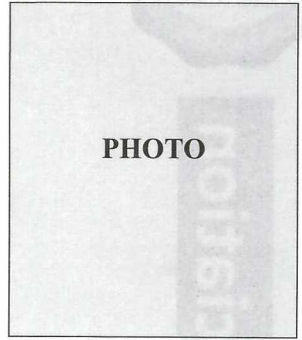
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I would like to apply membership of Society for Social Sciences and Research Association.

S.NO: _____

I am submitting registration fee for membership of

- 10 Year PKR 5,000
- Lifetime PKR 10,000



My credentials are as follow:

Name: _____

Father / Spouse Name: _____

Gender: Female / Male Marital Status: Married / Unmarried

Religion: _____ Nationality: 1 _____ 2 _____

Contact #: _____ Email: _____

CNIC #: _____ (attested copy should be attached)

Residential Address: _____

Work Address including name of institution or organization: _____

Position at Work Place: _____

Qualification

| Degree / Certificate | University / Board | Field of Study | Year Awarded |
|----------------------|--------------------|----------------|--------------|
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Society for Social Sciences and Research Association



Society for Social Sciences and Research Association

Publications

| Particular | Quantity | Remarks (if any) |
|----------------------------------|----------|------------------|
| No. of Research Papers Published | | |
| Proceeding of Conferences | | |
| Number of Books Published | | |

Affiliations and Memberships of other Organizations

1 _____

2 _____

3 _____

Reasons of Joining SSSARA _____

Date _____ Applicant's Sign _____

----- for office use -----

Comments by Reference Person

Name & Sign with Date _____

Decision by President _____

President Sign & Stamp with Date _____