

**ALL INDIA BHARAT SANCHAR NIGAM LTD. EXECUTIVES' ASSOCIATION**  
**Central Headquarters,**  
**New Delhi**

**ENROLLMENT FORM AS MEMBER**  
*(To be filled in triplicate)*

I, Mr./Mrs./Ms. \_\_\_\_\_ (in CAPITAL letters), working as  
\_\_\_\_\_ in \_\_\_\_\_ (Circle/SSA/Unit etc.)  
do hereby request to enroll me as the member of All India Bharat Sanchar Nigam Ltd.  
Executives' Association. I shall abide by the provisions of the Constitution of the Association

To  
The Branch Secretary,  
AIBSNLEA,  
\_\_\_\_\_

(SIGNATURE)

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**PETICULARS TO BE FURNISHED BY THE MEMBER.**

(IN CAPITAL LETTERS)

1. NAME IN FULL \_\_\_\_\_
2. DESIGNATION \_\_\_\_\_
3. DOT STAFF NO. \_\_\_\_\_
4. DATE OF BIRTH \_\_\_\_\_
5. UNIT OF POSTING \_\_\_\_\_
6. PERMANENT ADDRESS \_\_\_\_\_  
\_\_\_\_\_
7. PRESENT ADDRESS \_\_\_\_\_  
\_\_\_\_\_
8. PHONE NO. \_\_\_\_\_ (OFF) \_\_\_\_\_ (RES)

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(Signature of Branch Secretary)

Copy forwarded to Circle /Central Headquarters.