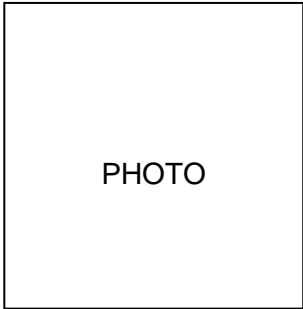


Date:

The Executive Council
Institute of Personnel Management, Bangladesh
Centre Point Concord, Level-10
Farmgate Main Road, Tejgaon, Dhaka-1215, Bangladesh



Application for Membership of IPM

I have the pleasure to apply for Membership of Institute of Personnel Management, Bangladesh (IPM). If I become a Member, I shall abide by applicable Rules & Regulations. My particulars are given below:

1. Name:
2. Father's Name:
3. Mother's Name:
4. Nationality:
5. NID No.:
6. Date of Birth:
7. Blood Group:
8. Permanent Address: Mailing Address
9. Present Address: Mailing Address
10. E-Mail Address:
11. Personal Cell Phone No.:
12. Emergency Contact Person: Cell Phone No.:

13. Educational Qualification:

Examination / Level	Degree / Diploma / Certificate & Subject	Board/University	Year	Result
S.S.C. / Equivalent				
H.S.C. / Equivalent				
Graduation / Equivalent				
Post Graduation & others				

14. Professional Qualification:

Degree/Diploma/Certificate	Subject	Name of the Institute	Year

15. Professional Experience:

Name of the Organization	Designation	Period (Dates)	
		From	To

16. Professional Membership/Affiliation:

Name of the Organization	Membership Category	Date of Enrolment

Membership Categories :
FIPM (Fellow Member of IPM)
MIPM (Member of IPM)
AIPM (Associate Member of IPM)

Yours faithfully
Applicant's Signature : _____

Note: Please attach a copy of last Educational Certificate, a copy of Certificate of HR Education, a copy of Office ID Card, a Visiting Card (if any), and a Personal Profile/ CV/ Resume; extra sheet(s) may be used if necessary

for Office Use only

Recommendation by Membership Committee: Recommended as <input type="checkbox"/> AIPM / <input type="checkbox"/> MIPM / <input type="checkbox"/> FIPM			
Signature on behalf of Membership Committee:			
Name:	Designation:		
Approved by EC in its Meeting held on _____ .			
President / Secretary General			
Deposited Amount: Taka	In words :		
Receipt No.:	Date:	Membership No. :	Date of Enrollment :
Signature:			