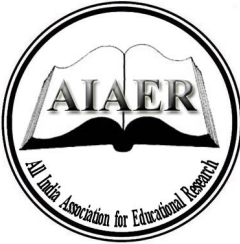


**ALL INDIA ASSOCIATION FOR EDUCATIONAL RESEARCH**  
*(Registered Under Societies' Registration Act 1860)*  
 (Regn. No. 1597-180 of 1987-88, Bhubaneswar)  
**N1/55 IRC Village, Bhubaneswar- 751 015**  
<http://www.aiaer.net>



**APPLICATION FOR INSTITUTIONAL MEMBERSHIP**

**INSTITUTIONAL LIFE / DONOR MEMBERSHIP INCLUDES**

**LIFE SUBSCRIPTION FOR JOURNAL OF ALL INDIA ASSOCIATION FOR EDUCATIONAL RESEARCH**

**Institutional Life Member: B - 6, 000/- ( ) A - 10, 000/- ( ) Institutional Donor Member 20, 000/- ( )**

**Institutional Membership Categories:**

- Category B Rs. 6,000/-- covers as individual life members all faculty members less than 15 of an institution**
- Category A Rs.10, 000/- covers as individual life members all faculty members 15-35 of an institution**
- Institutional Donor Membership: Rs.20, 000/- covers as individual life members all faculty members of an institution**

\*\*\*\*\*

**MODE OF PAYMENT OF MEMBERSHIP FEE**

**Drafts/Cheques to be drawn in favour of All India Association for Educational Research Payable at BHUBANESWAR**

Cash ( ) DD ( ) No. ....Date.....Bank.....

\*\*\*\*\*

**Application form along with membership fee to be sent to the Treasurer:  
 Dr. D.C. Mishra, House No. 4, Bivaba Estate, Barmunda Colony, BHUBANESWAR - 751 003, Orissa**

*Please Use Block Letters for filling up this form*

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**Designation of the Head of the Institution .....**  
**Name of the Institution .....**  
**Address .....**

.....

**Post.....Dist.....State.....PIN.....**

**Tel. No(With STD Code) Fax No. E-Mail ID**

**Programmes / Courses/Activities Offered**

**I agree to abide by the rules and regulations of the Association**

**Seal Signature of Applicant**

\*\*\*\*\*

**For Office Use**

**Date of Deposit in Bank .....Date of Credit.....-**  
**Receipt No.....Date.....Institutional Donor/ Life B /A / Donor No.....**

**Treasurer General Secretary**