

COUNCIL FOR TEACHER EDUCATION FOUNDATION (CTEF)

A professional National Organization of Teacher Educators (Reg. No Nagpur/0000403/2019 Registered under Societies Registration Act 1860) (XXI of 1860)

MEMBERSHIP FORM (FOR RESEARCH SCHOLARS) State/UT: photograph 1. Name: (in capital letters) 2. Official Address: Supervisor: Research Centre: University: 3. Residential Address: Pin Code: Mob. No.: E-mail: 4. *Membership Fee Paid: Transaction No. & Date: (Kindly make the payment in the form of DD/Cheque/Cash/Google Pay/NEFT in favour of CTEF Kerala payable at State Bank of India, Trivandrum City, IFSC SBIN0070028, Account No. 40616711292.) **DECLARATION** As a Member of the Council for Teacher Education Foundation (CTEF), I shall abide by the rules and regulations of the Forum. Place: Date: Signature of the Applicant For Office Use Only Amount Received: by DD/Cheque/Cash/Google Pay/NEFT Receipt No.: Date: Membership No.: Signature:

Name:

Designation: