

APPLICATION FORM FOR CERTIFIED / CHARTERED / PROFESSIONAL TITLE

The Director (Membership)
Confederation of Engineers

Administrative Office :

Office No.9 & 10, Manisha Blitz,
Shankar Math, Pune - Solapur Road,
Hadapsar, Pune - 411013 (M.S) India.

Mobile No.: +91 9960 895 786

E-Mail: info@ceindia.org



www.ceindia.org

Dear Sir,

You are requested to consider my application for issuing **Certified / Chartered / Professional** Title . I give below the following actual information.

I have not applied for Certified / Chartered / Professional Title earlier. Therefore, a requisite amount is being paid by demand draft (DD)/Cash/Online. Details are given below.

I hereby confirm that I am entitled for Certified / Chartered / Professional Certificate as have compounded my annual subscription for life/ made fully payment of the composite Subscription as per rule of the Confederation of Engineers.

My Membership Number is :

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Specialization :

Full Name (Block Letters) :

Address (Block Letters) :

..... Pin :

Phone/ Mobile No :Whats APP No.:

E-mail :

Full signature with Date

Enclosures :

I am enclosing following documents for your kind considering

- Membership Certificate
- Passport size Photographs 3 Nos
- Demand draft of requisite fees for Members (Demand Draft No.....Bank.....Branch..... Date) in favour of ' Confederation of Engineers, payable at Pune.'
- Paid the fees online vide reference no and Payment Gateway ID/ Transaction ID.....

For Office Use Only : Received the Application on vide reference no.....

Authorized Signatory : Name.....Designation.....