

Institution of Government Approved Valuers

A1/13 SHAKTI NAGAR EXTENSION, DELHI-110052 Tel: 32527976

APPLICATION FOR ENROLMENT AS FELLOW, MEMBER, ASSOCIATE MEMBER OR TRANSFER TO HIGHER CATEGORY

1. Full Name :
2. Father's/Husband's Name :
3. Date of Birth :
4. Profession & Designation :
5. Residential Address :
Tel: Mobile:
6. Office Address :
With Pin Code No. :
Tel:
7. Educational & Professional Qualifications
(Starting with Senior Secondary/Matriculation)

S.No	Name of Examination Passed	University/Board	Year of Passing

(Please attach a photo copy of Degree/Certificate of Graduation & higher qualifications)

8. Membership of other professional institution
9. Registration No assigned under
Wealth Tax Act by the Government (Income Tax Deptt.)
Attach a copy of Registration
10. Experience

Period	Name of the Employer & Position Held	Nature of Duties

11. Valuation assignment if any carried out

Year of Valuation	Name of the Client	Name of the Valuation Work	Valuation fee charged

I hereby apply for the membership of the Institution of Government Approved Valuers. I have read the Aims & Objects, Rules & Regulations and I hereby undertake to abide by them and also the decisions taken by the Institution and its National Council from time to time. I further undertake to work actively and to the best of my ability & capacity for realization of the Aims & Objects of the Institution.

Dated

(Signature of the Applicant)

FOR OFFICE USE ONLY

Date of approval of membership of the Institution and name of the approving authority

Category of the Membership and Membership No

SIGNATURE