

National Association of Professional Social Workers in India (NAPSWI)

Reg. No. 53647 of 2005 (Societies Registration Act XXI of 1860)

Website: www.napswi.org, Email: napswi@gmail.com, napswi2024@gmail.com

Secretariat:

NAPSWI Secretariat,

C/o A-399, First Floor Social Work Extension Building, Department of Social Work, University of Lucknow, Lucknow, India-226007

President Office:

D-1 / G 01, Tulip Grand Apartments, 35, Levan, sonipat, Haryana -131001, India Phone / WhatsApp: 9811516636, Email: napswi2024@gmail.com

INDIVIDUAL MEMBERSHIP APPLICATION FORM

(Only professionally qualified persons in social work are eligible to apply for membership. Attach a self attested copy of certificate)

Name:			Paste a recent passport		
Education in Social Work:	Yes/No.		size photograph (without signature); Do not staple the		
Category of membership:	Life/Associate/Stu	ndent/ Sr Citizen	photograph		
Degree: DSW/BSW/MSW/MA (SW)/Any other (Attach certificate)					
University		State			
Permanent Address					
Address for Communication					
Phone work		. Mobile			
Phone home		F-mail			

Cheque Details:		
(a) Amount (Rs.)	(b) Cl	heque No
(c) Name of the Bank		(d) Date
Membership Fees		
i) Life (individual)	:	Rs. 3,000/-
ii) Life (institutional)	:	Rs. 10,000/-
iii) Senior citizen	:	Rs. 1,000/-
iv) Student member:		
(a) Diploma student	t :	Rs. 200/- (for one year)
(b) BSW students	:	Rs. 500/- (for three years)
(c) MSW students	:	Rs. 1000/- (for two years)
Place:		
Date:		Signature of applicant
Note:		
	-	all be disposed by the Governing Body as per guidelines e right to change membership fees as and when required for
 Fees are to be paid through NAPSWI. 	cheques	of banks having national operation drawn in favour of
 Students must attach a self- principal/head of the depart 		copy of the student identity card or apply through the
	(F	or office use only)
-		ound/not found in accordance with the rules of membershipmay be granted/not granted membership of NAPSWI.
Secretary		Convener, Membership Committee
Membership No.		

Membership card issued on.



MEMBERS PROFILE

1. Name:				
2. Address:				
3. Phone:	Email			
4. Age:	Below 20 years/20-30/31-40/41-50/51	- 60/above 60 years		
5. Gender:	Male/Female			
6. Profession:	Educator/Practitioner			
7. If practitioner area: Health/education/correctional labour welfare /community work/administration/another				
8. Designation:				
9. Nature of em	ployment: Govt. Sector/Self employed/	NGO/Donor Agency/Corporate		
10. Salary (Per and above	annum): Below 50,000/-50,000-1 lakh/	/1-2 lakh/2-3 lakh/3-4 lakh/4-5 lakh/5 lakh		
11. Major Cont	ributions			
i)		ii)		
iii)		iv)		
12. Major areas	s of expertise			
i)		ii)		
iii)		iv)		
Place:				
Date:		Signature		