



**INITIAL MEMBERSHIP REFERRAL FORM**

Applicants to the Initial Membership of the Indian History Congress must get their applications proposed and seconded by two existing members of the Indian History Congress.

**Name of the Applicant:** .....

**Academic Qualification of the Applicant:** .....

**Current Academic Position of the Applicant (if applicable):** .....

**Signature of the Applicant:** .....

**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Proposed by:**

**Name:** .....

**Address:** .....

.....

..... **Years of Membership:** .....

**Membership No. (AM or LM):** ..... **Signature:** .....

**Seconded by:**

**Name:** .....

**Address:** .....

.....

..... **Years of Membership:** .....

**Membership No. (AM or LM):** ..... **Signature:** .....