



STUDENT ENROLLMENT FORM

PLEASE FOLLOW THE GUIDELINES GIVEN IN LAST PAGE & FILL THE FORM IN BLOCK LETTERS

1. Name : _____
2. Father's Name : _____
3. Date of Birth : _____
4. Address for Communication _____

House No. : _____ Street City/Town : _____
District : _____ Pincode : _____
State : _____

STD Code	Phone No	Mobile	E-Mail

5. IRDAi Enrollment Details : *****

- A. Enrollment No. : _____ B. Enrollment Date : _____
C. Training Started From _____ to _____
D. Training Completion Certificate issued by _____ in _____ Department.

6. Nationality

7. Qualifications :

A. Academic Qualifications

S.No	Name of Examination	Name of the School/College/University	Year of Passing
1.			
2.			
3.			

B. Professional Qualification

S.No	Name of Examination	Branch	Duration	Examining authority	Name of the College/Institution/University	Year of passing
1.						
2.						
3.						

C. Insurance Qualification

S.No	Name of Examinations Passed	Branch	Examining authority	Name of the College/Institution/University	Year of passing
1.					
2.					
3.					

D. Training Attended (if any)

S.No	Subject	Conducted on	Conducted at	Subject on	Duration of Training (hrs)
1.					
2.					

7. Present Occupation :

If in employment- Provide

Details like Designation, Name:

Address & Contact Number of the employer

8. Options for departments, in which you wish to undergo training :

1. _____ 2. _____ 3. _____

9. Name of Trainer Surveyor / Surveyor Firm :

SLA No. & Date of Expiry,

Membership No & Validity,

(Copy of License to be enclosed)

Categorisation Details

Department					
Category					

Phone & Mobile No : _____

Address : _____

House No. /Street : _____

City : _____

District : _____

State : _____

Pin Code : _____

UNDER TAKING OF TRAINER SURVEYOR/ SURVEYOR FIRM

I/We,.....(Name of Surveyor/ Surveyor Firm) bearing Membership No.....and SLA NO.....hereby certify that Mr..... is known to me and he desires to undergo surveyor practical training under my practice in the following department

1. _____ 2. _____ 3. _____

I have verified the information pertaining to educational qualifications (which are recognized by UGC/University/State Board of Technical Education) and Certify that they are true and correct. I am willing to impart the practical training as the IRDA regulations and Institutes guidelines.

Also, I undertake to impart practical training to the best of my knowledge and ability and agree to supervise his/ her performance on a weekly basis base on records to be maintained by the trainee and keep the IRDA and Institute informed about the progress by way of submission of quarterly reports in the form and manner prescribed.

I will adhere the rules & regulations, code of conduct, code of ethics of the institute and other regulatory provisions specified by IRDA for imparting the training.

In case if the training is discontinued, it will be informed to the Institute and IRDA immediately with a copy to the trainee.

Signature : _____
Membership No : _____
SLA No : _____
Date : _____

Seal of the Office

I S/O.....

Solemnly confirm and declare that the particulars given in the above application are true to the best of my knowledge and belief. **I am aware of that the Student Membership is issued only for Trainee Surveyors and will not entitle me to practice as a Surveyor.** I have read out thoroughly all the Acts, rules, regulation, provisions and Code of Ethics of the institute before signing this application and signed the undertaking in my knowledge.

Place :
Date :

(Signature of the Applicant)

Application for Identity Card

Membership No.

From

To
The Admin Secretary
IIISLA, Hyderabad.

Sir,

Sub: Issue of ID Card.

I am furnishing the following details to issue me the ID Card.

1. Name :
2. Address :
3. Membership No. :
4. Date of Birth :
5. Blood Group :
6. Phone No. :
7. Mobile No. :
8. E-mail ID :
9. PAN No. :
10. Affidavit. :

IIISLA

Thanking you,

Signature of Applicant

Enclosures :-

1. *Passport size photograph- 3 Nos.*

GUIDELINES FOR FILLING OF STUDENT MEMBERSHIP APPLICATION FORM

Item No.	Details	Guide lines for the applicant for filling the application
1	Name in Full	NAME IN FULL details are required in BLOCK LETTERS . Mention the Name as in mentioned in Qualification Certificate
2	Father's Name	Name in BLOCK LETTERS
3	Date of Birth	in DD/MM/YYYY form (Proof of the same is to be enclosed)
4	Address	Candidates have to furnish the Communication Address in BLOCK LETTERS Along with PIN CODE. Phone no. and Email ID are MANDATORY for processing the Application. (Copy of the Latest Address Proof to be enclosed)
5	Nationality	INDIAN
6	Qualifications	(A) Academic Qualifications- Details to be mentioned in the Table. (Notarised copies of certificates are to be enclosed)
		(B)Professional Qualifications-Details to be mentioned in the Table- (Notarised copies of certificates are to be enclosed)
		[C] Insurance Qualifications-Details to be mentioned in the Table- (Notarised copies of certificates are to be enclosed)
		(D) Training Attended (if any)- IRDA ENROLLMENT LETTER TO BE ENCLOSED ---Details to be mentioned in the Table
7	Present Occupation	It should be " Trainee Surveyor " or if Employed the details of the employment should be furnished
8	Options for Departments in Which...	The details of the departments you wish to undergo training has to be mentioned
9	Name of the Trainer Surveyor/ Surveyor Firm	All the details of the trainer should be mentioned in the relevant Columns. If the candidate is undergoing training from Different trainers in Different departments another sheet of the undertaking has to be enclosed by the candidate.(Licence copy of the trainer is to be enclosed)
	UNDERTAKING OF TRAINER....	Trainer has to fill in the details along with seal and signature
	Verification and Recommendation by ZONE.../CHAPTER.../UNIT...	The DESIGNATED PERSON(S) recommending should fill in all the details along with SEAL AND SIGNATURE- without fail which is MANDATORY for issuance of Student Membership
	Declaration by the Candidate	Signature of the candidate applying for membership is MANDATORY
	Payment Particulars	Once the application is approved by the membership committee, the demand note will be send by mail following which only, DD has to be drawn in favour of IISLA payable at Hyderabad.

Note: Please read the form carefully and fill the information in detail. Incomplete Application or Application with wrong information shall be rejected, without any further correspondence.

(The affidavit should be signed on a legal paper of Rs. 10.00 and should be duly certified by a Notary or 1st class Magistrate)

AFFIDAVIT

I.....S/O.....R/O ----- hereby declare and affirm as below –

1. That my address in IRDA Enrolment is and my Correspondence address is.....
2. That I am a IRDA Approved Trainee Surveyor and my enrolment no is..... effective from
3. That I am a trainee surveyor and loss Assessor as –

(Strike out whichever is not applicable)

- a. Practicing Independent Surveyor and work only on appointment of insurers or insured for issuance of my report of loss assessment.
 - b. Director of a surveyor company/Partner of Surveyor Firm namely -----having IRDAI license no SLA ----- and survey the claims as per surveyor’s code of conduct laid by the IRDAI and IIISLA.
 - c. I am an employee of corporate surveyor company namely ----- having IRDAI license no SLA ----- and the same is endorsed/not endorsed in my license.
 - d. I am an employee of Insurance Company namely -----and carry out survey only for the employer company strictly as per Act and/or IRDA regulations from time to time. That the same is endorsed in my license.
4. That in case there is any change in my status as declared above, the same shall be informed to IIISLA within 15 days of such change, failing which Institute shall be at liberty to cancel my membership without any notice.
 5. That if any information above is found to be incorrect, Institute shall have the right to take action as per law and rules there in.

I hereby declare and affirm under affidavit that above declaration is true and correct and nothing is concealed there in.

Deponent

Verification

I hereby declare and affirm that the contents above are correct and true to my knowledge and nothing is concealed thereof.

Signed on day of month year

Deponent