BIO DATA

CSI Membership No: (8 digits)

Nomination for the Post of:

Salutation: Dr. / Prof. / Mr. / Ms. / --------

Surname:

First Name:

Middle Name:

Age: (In year)

CSI Membership Since-
Year-YYYY ::
Membership valid up to

Address1:

Address2:

City:

Pin:

Mobile No.:

Phone No.:(With STD Code)

E-mail Address:

Educational Qualifications:

Contribution to IT profession:
**

Contribution made to CSI:
**

Experience : (most current)

**

Honors/Professional
Recognition:

Other Relevant Information:
**

Statement of Intent: (max 100
words)

In case of Nominees who are holding or have held an elected post in CSI in the last 3 years: :

Positions held:

Statement of intent submitted
for the above positions held:

Result achieved/action taken
against the details mentioned
in Statement of Intent:

Attach Photograph, Letter/Email of Nominee, Letter/Email of Proposer 1, and Letter/Email of Proposer
2

_____
Signature of Nominee

Date:

** Give information in brief.(last 3 year)