



**National Association of
Professional Social Workers in India
(NAPSWI)**

Institutional Membership Application Form

**Central Office: K-7, UGF/1, Khirki Extension, Krishna Mandir Marg, Malaviya
Nagar, New Delhi-110017, Ph: 011-26672424**

Website: www.napswionline.org, Email: info@napswionline.org

(Only Educational Institutions engaged in education/training/research of Professional Social Work are eligible. Attach self attested copies of certificates/brochures/prospectus of your Institution in support)

Name of the Institution:

Address:

Affiliating University:

Name of the Head of Institution:

E-mail:

Phone (O):

Fax No:

Course offered: DSW/BSW/MSW/MA (SW)/M Phil/PhD

Address for Communication

Phone work:

E-mail:

Year of Establishment:



Details of Faculty Members:

Name	Designation	Qualification	Experience
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.....
.....
.....
.....
.....

Infrastructure/Facilities:

1.
2.
3.
4.

➡ *Please attach Annual Report and Prospectus of Course for our reference.*

Membership Fees

Life (institutional) : Rs. 10,000/-

❖ *The payment can be made in two installments in favour of NAPSWI Delhi.*

Place:

Date:

Signature

Note:

- All application for membership shall be considered by the Governing Body as per guidelines framed. The governing body has the right to change membership fees as and when required for new membership.
- Fees should be paid through DD in favour of National Association of Professional Social Workers in India (NAPSWI) payable at Delhi.

(For office use only)

Details provided in membership form are found/not found in accordance with the rules of membership. The Institution.....may be granted/not granted membership of NAPSWI.

Secretary

Convener, Membership Committee

Membership No.

Membership card issued on.