



The Secretary,  
NABARD Employees' Co-op. Credit Society Ltd.,  
Plot No. C-24, G-Block, 1st Floor, 'E' Wing,  
Bandra-Kurla Complex, Bandra (E), Mumbai-400 051.

FOR OFFICE USE	
Membership No.	
Dept. / Sect. / Div.	
Centre	

**APPLICATION FOR MEMBERSHIP OF THE SOCIETY  
&  
MEMBERS' BENEVOLENT DEPOSIT SCHEMES.**

I am a full-time employee of National Bank for Agriculture and Rural Development and posted at \_\_\_\_\_

I apply to be admitted as an ordinary member of the NABARD Employees' Co-op. Credit Society Ltd., Mumbai and tender ₹ . 515/- (Rupees five hundred fifteen only) towards (Share Capital ₹ . 10/- + Entrance Fee ₹ . 5/- + Saving Deposit ₹ . 500/-) as membership fees. I also apply for membership of the Members' Benevolent Deposit Schemes of the society.

I agree & undertake to pay every month ₹ . 390/- (Rupees three hundred ninety only) or such other amount as may be amended from time to time by the society & authorise the society to recover the same from my monthly salary.

I hereby agree to abide by the Bye-Laws and the Rules of the society and the Rules of the M.B.D. Schemes, now in force or as may be modified or altered from time to time.

PARTICULARS OF THE MEMBER सभासदाची माहिती			
Full Name संपूर्ण नांव	Shri./Smt./Kum. _____ श्री./श्रीमती/कु. _____		
Short name as on Bank's record बँकेच्या रेकॉर्ड वर असलेले संक्षिप्त नांव	_____		
Designation हुद्दा	_____	Dept./Sect./Centre खाते/कार्यालय	_____
Date of Birth जन्मतारीख	_____	Married / Unmarried	_____
UIN	_____	Basic Pay ₹.	_____
Residential address (Local) रहाण्याचा पत्ता (स्थानिक)	_____		
	_____		
	_____		
Permanent address (कायम पत्ता)	_____		
	_____		
	_____		

CONTACT NO.

Email ID-

I nominate the following person to receive the amount of all my assets with the Society and the assistance under the M.B.D. Schemes in the event of my death.

माझ्या मृत्युनंतर सोसायटीमधील माझी सर्व रक्कम व सभासद सददिच्छा ठेव योजनेखाली मिळणारी रक्कम घेण्यासाठी मी खालील व्यक्ती वारस म्हणून नेमीत आहे.

(Normally nominee should NOT be any other person than one's wife/husband or son/daughter or father/mother. सामान्यतः सभासदाची पत्नी/पती/मुलगा किंवा मुलगी किंवा आई/वडील याव्यतिरिक्त दुसरी व्यक्ती वारस नसावी.)

**PARTICULARS OF THE NOMINEE : वारसाचा तपशील**

Full Name संपूर्ण नांव	Shri./Smt./Kum. श्री./श्रीमती/कु.	_____
Relation with the member सभासदाशी नाते	_____	_____

Signed before me. याझ्या समोर सही केली.

Signature of witness साक्षीदाराची सही

Applicant's signature अर्जदाराची सही

Witness Should be member of the Society.  
साक्षीदार सदर सोसायटीचा मेंबर असायला हवा.

Full Name  
संपूर्ण नांव \_\_\_\_\_

Centre/Dept. \_\_\_\_\_ Saving A/c No. \_\_\_\_\_ Date \_\_\_\_\_  
कार्यालय/खाते बचत खाते नंबर दिनांक

**CERTIFIED FROM NATIONAL BANK FOR AGRICULTURE AND RURAL DEVELOPMENT  
(NABARD)**

Certified that Shri./Smt./Kum. \_\_\_\_\_  
has been appointed in NABARD as full time employee  
on \_\_\_\_\_ & he/she has been confirmed in  
the services on \_\_\_\_\_

Signature of the authorised official  
of Establishment section / Staff  
section and seal(with rubber stamp)

Received ₹ . \_\_\_\_\_ on \_\_\_\_\_ and admitted as a member of the Society  
and as a member of the M.B.D. Schemes.  
Form is in order, put up for approval please.

Cashier/Clerk

Accounts officer/C.E.O.

Admission ratified by the Managing Committee in  
its meeting held on \_\_\_\_\_

C.E.O.