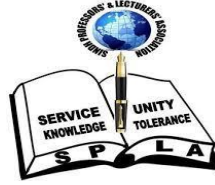


# SINDH PROFESSORS' & LECTURERS' ASSOCIATION

REGISTRATION NO. 1141

[REGD]

Membership No. \_\_\_\_\_



Form fees Rs. 20/=

## MEMBERSHIP/RENEWAL OF MEMBERSHIP 2024-25

The Annual Subscription fee Rs. 150/= is being sent here.

Government \_\_\_\_\_ College, Unit \_\_\_\_\_

District: \_\_\_\_\_ Region: \_\_\_\_\_

Name Mr./ Mrs. /Miss: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Position held at Present: \_\_\_\_\_

Date of entry into service as Lecturer / Librarian / DPE \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Qualification: \_\_\_\_\_ Subject: \_\_\_\_\_

Present Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

CNIC #: \_\_\_\_\_ Telephone Number: \_\_\_\_\_ Blood Group: \_\_\_\_\_

Date: \_\_\_\_\_

Yours Faithfully

(Signature of Applicant)

### FOR OFFICE USE ONLY

Mr. /Mrs. /Miss \_\_\_\_\_ has Paid Membership fee / Renewal fee  
Subscription for the year 2024-25 and enrolled / renewal as member of SPLA Membership No. \_\_\_\_\_

**President / Finance Secretary**  
**Unit/District/Region**

Received an amount of Rs.150/= (One Hundred Fifty only) Rs. 300/= (Three Hundred only) with thanks  
from Mr./Ms. /Mrs. \_\_\_\_\_ Govt. \_\_\_\_\_

on account of SPLA new/ Renewal Membership fees for the Year 2024-25.

Dated: \_\_\_\_\_

**President / Finance Secretary**  
**Unit/District/Region**