TM

A Public Limited Company

SUNGLOWSHINE INDIA PROJECT LIMITED

Incorporated Under the Companies Act 1956 CIN No.- U70109WB2012PLC183449

Registered & Corporate Office: CompuScience Bhavan, VIP Road, Birpur (N), Gurap, Hooghly - 712303, W.B., India

Office: Room No.- 506, 5th Floor, Panchwati Plaza, Kachhery Road, Ranchi - 834001, Jharkhand, India

Email: compuscience_kolkata@yahoo.com, compuscience_hooghly@yahoo.com, Website : www.compuscienceindia.com

Phone : 9775117982, 9830122392

INSERT HERE STAMP SIZE COLOR PHOTOGRAPH (15x20mm)

Member Code:

IT & EDUCATION MARKETING MEMBER APPLICATION FORM

FILL UP THIS FORM IN BLOCK LETTERS

System Member ID: **Pin:**

Member Name: **DOB:** D D M M Y Y Y Y

Age: **Sex: Male** **Female** **Mobile:**

Father/Husband Name: **Propose Member Step:**

DOJ: D D M M Y Y Y Y **Place:** **Occupation:**

Nationality:

PRESENT ADDRESS:

Post:

PS:

Dist/ City:

State: **PIN:**

Country:

PERMANENT ADDRESS:

Post:

PS:

Dist/City:

State: **PIN:**

E-Mail:

MEMBER EXPERIANCE DETAILS:

Company Name: **Year** **Fill up Previous Designations**

Proposed Area i where do you want to work:

MEMBER OTHERS DETAILS:

Qualification: **Status:** Married Unmarried

Hight: **Eye Color:** **Blood Group:**

Parent Member:

Code: **System ID:** **Step:**

MEMBER NOMINEE DETAILS:

Name:

Age: **Relation**

Address:

PIN:

MEMBER BANK DETAILS:

Signature of Parent Member

Name

A/c No.:

Branch: **Pro. ₹:**

PAN: **MICR:**

TM

Branch Code/ID:

IDENTITY CARD

Member Code:

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System Member ID: **Branch Name:**

Member Name: **Date:** D D M M Y Y Y Y

Step: **Unit Code /ID:**

Area Code /ID: **Valid From:** D D M M Y Y Y Y **Valid To:** D D M M Y Y Y Y

Member Signature with Date

Authorized Signature with Date

NEW MEMBER SPECIMEN SIGNATURE DETAILS :

I.....S/o,D/o,W/o..... .....Hereby affirm that the particulars given 1st page are true and nothing has been concealed. I have also read the terms and condition laid down for the engagement of marketing staff and small abide by the said condition.

Full Signature of Applicant / New Member:

Specimen Signature 1: **Specimen Signature 2:**

FOR OFFICE USE ONLY:

Branch Name: **Branch Code or ID :**

Unit Name: **Unit Code or ID :**

Area Name: **Area Code or ID :**

Checked By with Date: **Authorized Signatory:**

DOJ: D D M M Y Y Y Y **Step:** **System ID:** **Code:**

TERM & CONDITIONS:

1. Must be an Indian citizen with a minimum age limit of 18 years will be eligible for membership.
2. Every associate should their self attested photocopy of ID proof, residence proof, age proof.
3. The company preserves the right to modify change or abandon the career at its sole discretion with out arranging any reason or notice thereof.
4. In case of death of a member the nominee or nominee's relative as per exiting law, can continue marketing activities of the company in the same rank hold by the representative of the deceased person subject to a fresh application.
5. If any associate is found misbehaving, misconducting or miscampaigning, and in case of breach of all or any of these terms and conditions stated above, the management has the sole right to terminate his/her code without assign any reasons.
6. Once any member is agreed to work under a particular unit or leader, cannot be changed except such change is justified.
7. No snatching will be entertained, in that case the associate's code and payment will be cancelled automatically.
8. The company will not be responsible for any cash transaction unless received and acknowledge by an official of the company's office only.

DECLARATION:

1. I have not been declared insolvent and of unsound mind. I don't have any criminal record nor there is any criminal proceeding against me in any court of law and I am not involved in any terrorist or smuggling activities.
2. I hereby affirm that the particulars given above are true and nothing has been concealed. I have also read the terms & conditions for the engagement of marketing staff and shall abide by the said conditions.
3. I will neither join team nor in any other name (family/friend/other circle too. I agree to abide by and assist all the terms & conditions stated above and circulars to be issued by the governing body of the company from time to time.

Signature of the Applicant

For Computer Education Course And IT Service Booking Get Up To 25% Special Bonus

Contact With Us For 100% Job Guarantee IT Course

For IT Product/Computer System Booking Enjoy Special Bonus or Discount

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Terms & Condition

1) This is temporary Identity Card Acknowledgment.
2) This Identity Card must be carried by the member at all times within the SSIPL Office / Field and must be produced on demand.
3) The card acknowledgment is not transferable.
4) Loss of this card acknowledgment must be reported to the office and there will be a charge for replacement.
5) Validity of this card acknowledgment maximum three months only.
6) Within in three months collect your e-card / non-e-card from office and submit this card acknowledgment.
7) In case your don't gate your e-card / non-e-card within three months then contact your office validity extension of this card acknowledgment.

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