

Indian Association for Research in Computing ScienceSchool of Technology and Computer Science, Tata Institute of Fundamental ResearchHomi Bhabha Road, Colaba, Mumbai 400 005Phone: +91-22-22152971Fax: +91-22-22152110URL: http://www.iarcs.org.in

Membership/Renewal Form				
1.	Name:		Signature:	
	Address:			
	Email:		Fax:	
2.	Highest Degree Obtained:			
3.	Research Interests:			
4	Desitions held and Comment D):		
4.	Positions held and Current P	'OSIUI0II:		
5.	Responsibilities in the Curren			
	$Education \square$	$Research \square$		$Managerial \square$
6.	Proposer: ^a			
	Name:			
	Signature with Date:			
7.	Details of the enclosed draft:			
	Number:	Date:	Amount:	
	Name of the Bank:			
	Drawn on (branch):			
Plea	se send the completed form ar	nd the draft/cheque fo	or the appropriate a	mount to:

Mr. Chandrakant Sadashiv Talekar Senior Project Assistant, C.F.D.V.S. Department of Computer Science and Engineering Indian Institute of Technology Bombay Powai, Mumbai 400 076 e-mail: chandu@iitb.ac.in

^aNot required for graduates in Computer Science and faculty members.