

# **BSNL EMPLOYEES UNION**

(Registered under Indian Trade Union Act, 1926, Regn. No. 4896)  
CHQ, Dada Ghosh Bhavan, 1, Patel Road, New Delhi - 110008

## **APPLICATION FOR MEMBERSHIP**

1. Name of official :
2. Designation :
3. Office :
4. Age :
5. Date of entry in service :
6. Residential Address :
7. Phone Numbers (Mobile / Office / Res) :

## **DECLARATION**

I certify that the particulars given above are correct. I agree to abide by the constitution of the Union. I request that I be enrolled as member of BSNL Employees Union.

Place:

Date:

**Signature of Applicant**

Com..... of.....  
..... is enrolled as member of BSNL Employees  
Union, ..... Branch.

**Signature of Branch Secretary**

**DECLARATION FOR DEDUCTION OF UNION SUBSCRIPTION FROM SALARY OF  
THE MEMBERS OF THE MAJORITY REPRESENTATIVE UNION**

To,  
The Accounts Officer

.....  
.....

Sir / Madam

I,..... a  
member of the BSNL Employees Union, hereby authorize you to deduct Rs.....  
from my salary as my subscription to the Union payable to the BSNL Employees Union units  
as follows:

District Branch (District Secretary)	– Rs. ____/-
Circle Branch (Circle Secretary)	– Rs. ____/-
Central Head Quarters (General Secretary)	– Rs. ____/-

Yours faith fully

Signature

Station.....

Name .....

Dated.....

Designation .....

Staff No. ....

Place of Posting .....

**TO BE FILLED BY THE RECOGNISED MAJORITY REPRESENTATIVE UNION**

It is certified that Shri/Smt/Ms.....  
is a member of the BSNL Employees Union.

SIGNATURE OF BRANCH / DISTRICT SECRETARY  
(STAMP OF THE UNION)

**OFFICIAL LETTER OF A.O.**

SIGNATURE OF CONTROLLING OFFICER  
(GROUP B LEVEL AND ABOVE)  
NAME AND DESIGNATION WITH OFFICE SEAL