



DELHI POLICE

'PRAGYAN' KNOWLEDGE CENTRE

MEMBERSHIP FORM

(Please fill in CAPITAL LETTERS)

Membership No _____

Membership Type – Delhi Police Family Members.

Passport Size

Photo

Name of the Family Member _____

Parent's / Spouse Name _____

Parent's / Spouse PIS No. _____

Rank of Parent's / Spouse _____ LA SG FR N/A

Cadre _____ Family Member's Date of Birth _____

Gender Male Female Mobile No. _____

Present Address _____

Parent's / Spouse Office Address _____

Email _____

I hereby undertake not to remove/pick from the library or to mark, deface, any document or other object belonging to it or in its custody and I promise to obey all the regulations of the Knowledge Centre/PHQ.

Date _____

Signature of Member

For Official Use

Membership No. _____

Date _____

Signature of Inspector of
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'PRAGYAN' KNOWLEDGE CENTRE

MEMBERSHIP FORM

(Please fill in CAPITAL LETTERS)

PIS No. _____

Name _____

Rank _____ LA SG FR N/A

Cadre _____ Date of Birth _____

Date of Retirement _____

Gender Male Female

Residence Address _____

Office Address _____

Email _____

Mobile No. _____

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