

## PUBLIC ADMINISTRATION ASSOCIATION OF NEPAL

## (MEMBERSHIP - FORM)

Name (in full	and block letters) Mr./Mrs./N	Miss	
Age	A.D	Nationality	
Permanent A	Address		
Temporary A	ddress		
Office Address and Tel. No.		Res. Tel No.:	
		Ordinary	Life
		les and regulations laid down in the co	nstitutions of
Public Admi	nistration Association of N	lepal.	
Place			
Date		Signature of the applicant	
	recommended by		
			Signature
For office us	se only:		
	eceived on		
Membership	granted on		
Serial number of the membership		App	roved
		Claustine	the Oseridant

PUBLIC ADMINISTRATION ASSOCIATION OF NEPAL MEMBER'S PROFILE 1. Full Name: Photo 2. Date of Birth: 3. Nationality: 4. Sex. : 5. Postal Address: 6. Office: 6.1. Office Address: (including Telephone, Telex, Fax, Post Box, etc..): 7. Academic Qualification (Bachelore and Above) Level University Subject Year 1. 3. 4. 5. 8. Training Name Institute Country Duration Year (in week) 1. 2 3. 4. 5. 9. Research/Consultancy Topic Sponsor Year 1. 2. 3. 4.

5.

## 10. Experience Position Office Duration 1. 2. 3. 4. 5. 11. Area of Specialisation / Interest 1. 2. 3. 4. 5. 6.

## 12. Membership of Professional Organisation

1. 2. 3.

4. 5.

13. Hobbies