

(Registered under section 58(1) of the Indian Partnership Act 1932 by the Registrar of Firms, Andhra Pradesh India)
(An ISO 9001:2015 Certified and MSME Registered Organization)

Reg. Office: D. No: 2-139, BESIDE CHURCH, THUMULA CENTER, PORANKI, ANDHRA PRADESH-521137. Branch Office: D. No: 17-196, 5TH LINE, NEW SANATH NAGAR VIJAYAWADA, ANDHRA PRADESH, INDIA-520007. Website: www.theiiet.com, E-mail: contact@theiiet.com, iietcustomercare@gmail.com, Contact: 91-9533111789, 91-8410479999.













DATA SHEET FOR STUDENT CHAPTER (IIET-SC) AND INDIVIDUAL STUDENT MEMBERSHIPS (SM)

Name	Name of the Institution/University:			Depart	ment:	Course & Y	Year:
S.No	Member ship No. will be allotted by HET	Name of Student As per SSC	Father's Name	Date of Birth (dd-mm-yyyy)	Residential Address	E-mail Id & Contact No	Photo
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RECOMMENDATION LETTER FROM HEAD OF THE INSTITUTION TO ESTABLISH HET STUDENT CHAPTER

I hereby certif	y that the above is the list of students of		*()	Instituti <mark>on/ University</mark>
to establish I l	ET STUDENT CHAPTER at our organizat	tion and the information given is	s correct as per the college r	<mark>ecords. In thi</mark> s regard, I an
assigning one	faculty Coordinator to look after the student of	chapter activities. You may conta	ct the Coordinator for further	works to be done in future
His/ Her detai	ls are as follows:		1	
Name of facu	lty Coordinator:	+1.11	_ Designation:	
IIET membe	rship category & number: STUDENT MEN	MBER (SMIIET):		
Mobile / Pho	ne number:			
Email Id:	5 3		6 3	
Details of Pay	vment: Amount (Rs):	(In words:)
By Cash / DD	number / NEFT Transfer (Transaction Ref	f.No.)/UPI Transaction No:		
Date of Paym	ent:			

Signature of Head of the Department/ Institute With seal