



MEMBERSHIP APPLICATION FORM

MEMBERSHIP CATEGORIES (RENEW AFTER EVERY 4 YEARS)

1. *Apprentice Member*

A member who is under training in the fitting and fabrication of ocular prosthetics under the Associate or Active member of OSI and actively enrolled in the Education Program (Annual Conference) of the Ocularist Society of India.

(This membership can be upgraded to Associate membership after 5 years on eligibility of becoming associate member)

2. *Associate Member*

A member who is principally engaged in practice as an ocularist and actively enrolled in the Education Program (Annual Conference) of the OSI, Must have completed 5 years of practicing. Then only, he/she is eligible for this membership.

This membership can also be offered to other allied specialist in prosthetics / Ophthalmologists /Oculoplasty Surgeons, they will not have any right for vote but they can attend the annual Meeting. (This membership can be upgraded to Active membership after 3 years or on eligibility of becoming active member)

3. *Active Member*

A member who is principally engaged in practice as an ocularist and actively enrolled in the Education Program (Annual Conference) of the OSI, Must have completed 8 years of practicing and he/she must have presented at least in 2 National Or International Conference on ocular prosthetics, and actively enrolled in the Education Program of the Ocularist Society of India. Active member can become office bearer and also eligible to vote for the same. To become Active Member of OSI one has to qualify the qualifying exam conducted by OSI.

Please read the application carefully and attach all requested documents. Improperly filled out or incomplete forms will not be entertained.

PLEASE TYPE OR PRINT LEGIBLY AND SEND IT TO:

Jibran Munaver

Ocularists Society Of India

De Cure Centre, 1252H, 22nd Main Road, Vanganahalli, 1st Sector, HSR Layout, 1st sector, HSR Layout, Bengaluru 560102 KARNATAKA Mobile: +91-9742652245

E-mail: munaverjibran1@gmail.com



Membership Up-gradation Form

Applicant Information:

I hereby apply for up gradation from Apprentice to Associate ☐ or Associate to Active ☐ MEMBERSHIP in the Ocularist Society of India and I am submitting my previous membership certificate along with other data and documents related to myself for eligibility to apply for the up gradation of my membership to the Education Committee of the Society.

Name Mr / Ms / Mrs _____ Age _____ DOB _____

Business Practice Name (if any) _____

Communication Address _____

City _____ State _____ PIN Code _____ Country _____

Cell: _____ Email _____ Web Site _____

CURRENT MEMBERSHIP

Apprentice / Associate

Dated: _____

APPLYING FOR

Associate / Active

Date: _____

UP GRADATION FEES: (select examination for up gradation)

Apprentice to Associate INR 3500 ☐

Associate to Active INR 5000 (Includes Examination Fees) ☐

PAYMENT DETAILS

Transfer receipt No: _____ Bank: _____ DOT: _____

Amount: _____ (In words _____)

BANK DETAILS:

Name: **"OCULARIST SOCIETY OF INDIA"**

Account type: **CURRENT ACCOUNT**

Account No.: **1612132592**

IFSC CODE: **KKBK0000193**

Branch: **DWARKA SECTOR 5, NEW DELHI**

Signature

Date:

Please attach the previous membership certificate along with digital passport size photograph , filled form and related documents / certificates & sent to given address.

Note: Please fill the form completely and carefully as incomplete form or wrong information will be rejected and there will be no refund in such case