

# IGEN ENSAVCLUB IM NOMINATION

CONTENT	INFORMATION
INSTITUTION NAME	
ADDRESS	
HEAD NAME	
CONTACT INFORMATION	

Total Member	Student Member	Staff Member

CONNECTED DEPTS	
MONTHLY EB BILL UNIT/INR	
PERCENTAGE OF GREEN POWER& ENERGY WASTAGE	

ENSAV AMBASSADOR NAME	EMAIL	WHATSAPP NO

DECLARATION : I/We hereby declare that I will abide by the rules & regulations of the IGEN Society, as laid down in the Bye-laws and the decisions of the Society.

Station and Date



FOR IGEN OFFICE USE



Signature of the Institution Head

Application for the Institutional ENSAVCLUB Membership is admitted and the Register Number allotted is.....