

PROFORMA

FOR AWARDING OF SHIELDS TO EMINENT COOPERATORS OF DELHI

1. NAME OF THE APPLICANT
2. NAME & ADDRESS OF THE SOCIETY WHICH HE/SHE REPRESENTS
3. DESIGNATION IN THE SOCIETY
4. EDUCATIONAL QUALIFICATION
5. EXPERIENCE IN COOPERATIVE MANAGEMENT (GIVE DETAILS)
6. GIVE DETAILS FOR THE CONTRIBUTION IN THE DEVELOPMENT OF COOPERATIVE

SIGNATURE OF APPLICANT

Recommended and forwarded to the Chairman, Cooperative Education Fund/Registrar, Cooperative Societies, Old Court Building, Parliament Street, New Delhi.

**SIGNATURE OF PRESIDENT/SECRETARY
WITH SEAL OF THE SOCIETY**