



# STATE BANK OF INDIA SC/ST EMPLOYEES' WELFARE ASSOCIATION

**SBI SEWA, KOLKATA CIRCLE**

(WEST BENGAL, SIKKIM, ANDAMAN & NICOBAR ISLANDS)

(Affiliated to National Federation of State Bank of India SC/ST Employees)

Website: <https://sbisewakolkata.com/> • REG.NO. S/IL/18741/03-04

**BLOCK E, 1 STRAND ROAD, 7<sup>th</sup> FLOOR, SAMRIDDI BHAWAN, KOLKATA 700001**

## Membership Application Form

To,  
The DGM/AGM/CM/BM,  
State Bank of India,  
H. R. M. Section (Kolkata).  
Dear Sir,

**AUTHORISATION FOR DEDUCTION OF MONTHLY SUBSCRIPTION TOWARDS MEMBERSHIP OF STATE BANK OF INDIA SC/ST EMPLOYEES' WELFARE ASSOCIATION (KOLKATA CIRCLE), FROM MEMBERS' MONTHLY SALARY & ALLOWANCES.**

I requests you to deduct from my salary and allowances every month a sum of Rs (SUPERVISING STAFF Rs. 200/-, CLERICAL STAFF Rs. 150/-, SUBORDINATE STAFF Rs. 100/- ONLY) and remit the same to the STATE BANK OF INDIA SC/ST EMPLOYEES' WELFARE ASSOCIATION (KOLKATA CIRCLE).

### Personal Details

Name of the Applicant: ..... Date of Joining.....  
PF No.: ..... Designation:.....  
Grade / Scale: ..... Date of Birth: ..... Gender:.....

### Service Details

Present Branch Name: ..... Branch Code .....  
Region: ..... Module..... Whatsapp Number:.....

### Category Details

Community (Tick ✓):  Scheduled Caste (SC)  Scheduled Tribe (ST)

### Permanent Address

.....PIN.....

### Membership Declaration

I,....., hereby apply for membership of SBI SC/ST Employees' Welfare Association, Kolkata Circle (SBI SEWA Kolkata Circle).

I declare that: 1. I belong to SC/ST community as per Government notification. 2. All information provided in this form is true and correct to the best of my knowledge. 3. I agree to abide by the Memorandum, Rules, Regulations, and Code of Conduct of the Association. 4. I authorise deduction/payment of the membership subscription as decided by the Association. 5. I authorise SBI to deduct the membership subscription by check-off as decided by the Association from time to time. No further authorisation shall be required. 6. I consent to receive all SBI SEWA notifications and communications through any media or mode of communication. 7. I shall strictly adhere to the Social Media Rules as prescribed by the State Bank of India from time to time, in alignment with the SBI Conduct Rules, IT Security Policy, and RBI guidelines. I shall not post, share, forward, or circulate any content on social media or digital platforms that may adversely affect the image, reputation, discipline, or interests of the Bank or the Association. 8. I shall avoid naming, identifying, targeting, or making personal remarks against any individual, including officers, staff members, or functionaries of any Association or Union.

Date: .....

Signature of Applicant

Signature of General Secretary