GOVERNMENT OF MANIPUR
DEPARTMENT OF SCIENCE AND TECHNOLOGY: DIRECTORATE
OLD LAMBULANE, IMPHAL – 795001.

(INNOVATION HUB, MANIPUR SCIENCE CENTRE)

MEMBERSHIP FORM

1. Name of the Student/ Applicant: _____
2. Name of the School/ College: _____
3. Class/Standard: _____
4. Residential Address: _____
5. Phone/Mobile: _____
6. E-mail: _____
7. Type of project (tick one):- (School / College based/personal)
8. Subject area of the Project/idea in a which the Team/participant intend to work:
   (eg. Physics/Chemistry/Biology/ Robotics/Environment Science/Mechanical/Electronics/ Others

   _____
9. Tittle of Project/Idea: _____
10. Status of Project/Idea (Tick one)
    ☐Initial/Idea phase ☐ Model preparation/Testing phase ☐ Advanced phase
11. Operating mechanism/function/working principle of the idea/project:

    _____

    _____
12. Whether the idea/Project can be materialized and implemented practically to address local issues:
    a) If yes, Specify its Application:

    _____

    _____

    b) If No, Skip no.12.
13. Preferred working days:
    - ☐ Monday
    - ☐ Tuesday
    - ☐ Wednesday
    - ☐ Thursday
    - ☐ Friday
    - ☐ Saturday

(Curator's signature)