



**XAVIER BOARD OF HIGHER EDUCATION IN INDIA**  
**APPLICATION FOR LIFE MEMBERSHIP / ANNUAL MEMBERSHIP**

For Office use only:

Region: \_\_\_\_\_ Membership No. LM/XB/ \_\_\_\_\_

Name of the College \_\_\_\_\_

Full Postal Address \_\_\_\_\_

\_\_\_\_\_ Pin \_\_\_\_\_

College Website url www. \_\_\_\_\_

Telephone No. with STD code: \_\_\_\_\_

Email id of the College \_\_\_\_\_

Name of the Principal \_\_\_\_\_

Mobile No. of Principal & Email id \_\_\_\_\_

Name of the Manager / Chairman \_\_\_\_\_

of the College \_\_\_\_\_

Type of ownership (tick) Diocese  Society  Private

Religious: Men  Women  Secular Institute

Individual  Any other (Specify):

Name of the Diocese / Rel. Congregation: \_\_\_\_\_

Year of Establishment of the College: \_\_\_\_\_

University to which affiliated \_\_\_\_\_

Status (tick all the relevant items): Affiliated  Constituent  Autonomous

Aided  Self-financed  Both

Programmes Offered: (BA, B.Sc., B.Com., B.B.A, .....M.A., M.Sc. etc.)

U.G.: \_\_\_\_\_

P.G.: \_\_\_\_\_

Research: \_\_\_\_\_

	Girls	Boys	Transgender	Total
Total Number of Teaching Staff (Permanent only)				
No. of Catholic Teaching Staff (Permanent only)				
Total No. of Student				
No. of Catholic Students				
Total No. of Non-Teaching staff				
No. of Catholic non-teaching staff				

Please attach a brief history of the institution

Accreditation Status: Accredited  Not Accredited   
Year of last Accreditation \_\_\_\_\_  
Accreditation Grade: (A+, A, B+, etc.) \_\_\_\_\_  
Cycle No. (1<sup>st</sup>, 2<sup>nd</sup>, etc.) \_\_\_\_\_

College with Potential for Excellence (CPE)  College of Excellence

Any other relevant information:

### DECLARATION

I, Dr. Fr. / Sr./Mr./Ms. \_\_\_\_\_, Principal of \_\_\_\_\_ College request you to kindly enroll the above-named institution as a Life Member of Xavier Board of Higher Education in India. The institution agrees to abide by its rules and regulations and participate in its deliberations, programmes.

The prescribed **Life Membership Fee** has been transferred by bank transfer after informing the XB Office.

Bank transfer Transaction reference No. .... dated ..... from (Bank name) ..... for Rs...../-

For payment through Net banking after informing the XB Office (Account No, and IFSC code will be given on request).

Signature of the Principal \_\_\_\_\_ Manager \_\_\_\_\_

Name of the Principal \_\_\_\_\_ Manager \_\_\_\_\_

Date: \_\_\_\_\_

Place: \_\_\_\_\_

(College Seal)