

Membership Application

PLEASE USE BLOCK CAPITALS

1. PERSONAL DATA

- 1.1 Name in full
 (Underline surname)
- 1.2 Private Address

- 1.3 Telephone 1.4 Mobile 1.5 Fax
- 1.6 Date of Birth 1.7 Gender - Male 1.8 Age (As at today)
 Female
- 1.9 Nationality 1.10 Marital Status
- 1.11 Decorations, Title and Honors
- 1.12 Address for Correspondence (Postal)
 E mail Address
- 1.13 Designation.....
- 1.14 Total Senior Executive Service

2. QUALIFICATION & ACHIEVEMENTS IN MANAGEMENT

2.1 Academic Achievements

College/ University	Period (From - to)	Achievements

2.2 Professional Qualification in Management

Postgraduate Institute	Qualification	Year

2.3 Other Professional Qualification

Name of Institute	Year	Achievements
.....
.....
.....

3.1 PURPOSE OF JOINING THE INSTITUTE - For Career Development/ to Satisfy Professional Goals in Management/ for any other reasons (if so please specify)

3.2 Please tick (✓) against the appropriate category you wish to be enrolled

Member Associate Affiliate Student

4. DECLARATION BY THE APPLICANT

I declare that the statements made herein are correct to the best of my knowledge and belief, and that if admitted to appropriated Grade of Membership, I agree to be governed by the Rules and Regulation of the Institute of Management of Sri Lanka, as they now exit and as they may hereafter be altered.

Date Signature

5. CERTIFICATION BY EMPLOYER/ CORPORATE MEMBER

5.1 I certify that the above details given by him/ her are correct to the best of my knowledge and belief, and that he/ she is a fit and proper person to be admitted to IMSL membership.

Signature of (Employer)/ Immediate Superior Officer Date
Name Contact No
Designation
Address

SIGNATURE (Please affix your rubber stamp against your signature)

5.2 APPLICATION PROPOSED BY

Name of Proposer
Designation Membership No & Category
Address

Telephone No Signature of proposer Date

SECONDED BY

Name of Seconder
Designation Membership No & Category
Address

Telephone No Signature of Seconder Date