## SRI LANKA ADMINISTRATIVE SERVICE ASSOCIATION (SASA) NOMINATION FORM FOR EXECUTIVE COMMITTEE MEMBERSHIP FOR THE YEAR- 2025/2026

Please attach a photograph taken within the last 6 months

3.5c.m\* 4.5c.m

Noi	nination for the post	of:				
NOMINEE						
01.	Name :					
02.	Membership No :					
	Office Address :					
04.	Private Address :					
05.	Telephone :- C	Office:		Private:		
	F	ax:		Mobile:	• • • • • • • • • • • • • • • • • • • •	
06. Branch Representation:						
I hereby give my consent to serve as the/ a						
Of the Executive Committee of SASA for the year 2025/2026.						
Signature of the candidate: Date:						
<b></b>		E DD 6	opogep			
TO BE FILLED BY THE PROPOSER						
01.	Name of the proposer	r :				· • • • • • • • • • • • • • • • • • • •
02.	Membership No	:		• • • • • • • • • • • • • • • • • • • •		
03.	Office Address	:			• • • • • • • • • • • • • • • • • • • •	
04.	Private Address	:				
05.	Telephone	: Off	fice:	Private/ Mobile:		
06.	Branch Representation	on :			• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •
Sign	nature of the proposer	:		Date :		
TO BE FILLED BY THE SECONDER						
01.	Name of the Seconde	er:			• • • • • • • • • • • • • • • • • • • •	
02.	Membership No	:				
03.	Office Address	:			• • • • • • • • • • • • • • • • • • • •	
04.	Private Address	:				
05.	Telephone	: Off	fice:	Private/ Mobile:		
06.	Branch Representation	on:				
Sign	nature of the Seconder	· <b>:</b>		Date		

The application form must be accompanied by a 4.5 cm\* 3.5cm photograph of the applicant taken within the last 06 months.

Please send your nomination to Hon. Secretary on or before 1500hrs on 19<sup>th</sup> July 2025 Visit: <a href="www.sasa.lk">www.sasa.lk</a> or call 0718016096 for further details.