



# INSTITUTE OF BIOLOGY - SRI LANKA

## Membership Application Form

1. **Name:** (in-full, underline surname) Miss./Mrs./Mr./Dr./Prof.

2. **Address:**

(a) Official:

Tel:

(b) Private:

Tel:

(c). Please indicate to which address your letters should be sent: a/b

(d). E. mail address:

3. **Personal Details:**

(a). Sex

(b). Date of birth

(c). Citizenship

4. **Education:**

(a) First Degree

University

Period of study

Subjects

Degree

Class

(Please attached a copy of the degree certificate, certified by the Head of the Department/Institution)

If still an undergraduate please state

University:

Subjects

Expected year of graduation:

(b) Post graduate degree/s and or Diploma:

Post graduate

University/ Institute

Dates (From- To)

Field of Specialization

Degree/ Diploma

5. **Professional Experience:** (Attach separate sheet if necessary)

(a) Current Employment:

From:

To:

Position

Employer:

Responsibilities and duties:

(b) Past Employment:

From:

To:

Position

Employer:

Responsibilities and duties:

(c) Past Employment:

From:

To:

Position

Employer:

Responsibilities and duties:

6. **Membership in other Professional Associations/Societies etc.**

7. **Any other experience:**

8. **Are you already a Member/ Associate/Licentiate or a Student member of the Institute of Biology, Sri Lanka, If so, please indicate the category and your role number.**

9. **Referees (Must be IOB members)**

Proposer

Secunder

Name:

Address:

Signature

10 **Certification** (To be signed by all applicants)

I certify that the information given in this application form and in any attachment is correct to the best of my knowledge and belief, and that I will abide by the decision of the Council of the Institute of Biology, Sri Lanka in pursuance of this application. I agree that if any of the information given by me is found at any time to be incorrect membership is liable to be terminated.

Date:

Signature:

Instruction: Please send your application to The Secretary, Institute of Biology, 120/10, Wijerama Mawatha, Colombo 7". Council of the Institute will review your application and depending on your qualification you will be placed in any one of the following categories: Fellow, Member, Associate, Licentiate, Affiliate or Student Member. The Secretary will notify you the category of membership and about payment of membership fee.

For official use only: Considered at

Meeting held on

Category

Membership No: