



INSTITUTE OF BIOLOGY SRI LANKA

(Incorporated by Act of Parliament No. 22 of 1984)

Membership Application Form - A Student Member

Please, tick the boxes appropriate to you

CATEGORY UNDER WHICH THE APPLICANT IS BASED ON		
1	Registered undergraduate offering any subject in the field of Biology in a recognized university	
2	Passed such qualifying examinations or sections of examinations as are acceptable to the Council	

1 PERSONAL DETAILS		Title		Prof	<input type="checkbox"/>	Dr	<input type="checkbox"/>	Mrs	<input type="checkbox"/>	Miss	<input type="checkbox"/>	Mr	<input type="checkbox"/>
		Other (please specify)											
		Name: (with initials)											
		Full Name : (in Block Capitals)											
				Gender		Female				Male			
Day		Month		Year		Age		Citizenship					
Date of Birth													
(Original or certified copy of the certificate should be attached)													

2 ADDRESS AND EMPLOYMENT	Residential Address	
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To which address the correspondence should be sent (Residential/ Office)		
Telephone		Postal Code
		e-mail

3 CERTIFICATION (Please attach a copy of the student ID, certified by the Head of the Department/Institution)	
Name of Degree	
Institution	
Principal Subjects	
Subsidiary Subjects	
Expected year of graduation	<input type="text"/>
Certification by the Head of Department/ Institution about the applicant's student status: <i>I certify that the above named is currently a student of this University/ Institution.</i>	
<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
Signature of the Head of Department	

4. MEMBERSHIP IN OTHER PROFESSIONAL ASSOCIATIONS/ SOCIETIES ETC.	
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5. ANY OTHER RELEVANT EXPERIENCES	
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6. Payment of Subscription fee	
<p>The payment can be made as a direct bank deposit / online transfer/ check deposit to the “Institute of Biology, Sri Lanka” account at Peoples Bank, Thimbirigasyaya branch (Account number 086-100141191763)</p> <p>Please attach a copy of the payment slip/ cheque or bank draft with the application form as a proof of payment.</p> <p>The membership fee : Rs. 500.00 (One time)</p>	
	Date of Payment
	Amount paid
	Cash/ Bank draft/ Cheque
Member’s account details (In case of an unsuccessful application, the payment will be refunded within three (03) months)	Name of the Bank
	Name of Branch
	Account Number
	Name of the Account Holder

7. 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, the membership is liable to be terminated”.

Date:

Signature:

Instructions to the applicant: Please email your application along with **recent bio data** and other necessary documents (see the **checklist below and follow the same order in saving as pdf**) as a **single pdf** document to jobslcouncil@gmail.com. The Council of the Institute will review your application and depending on your qualifications you will be placed in the Student Member Category.

CHECKLIST FOR APPLICANTS	
Completed application form	
Certified copies of all relevant educational and professional qualifications	
Certification by the Head of Department/ Institution about the applicant’s student status (Box no. 02 above)	
CV of the applicant	
Payment of subscription fee	

For official use only:

Considered at the Council Meeting held on.....

Category and Membership No:

Comments:

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