

Sri Lanka Society for Transport & Logistics (SLSTL)

c/o Department of Transport & Logistics Management, Faculty of Engineering, University of Moratuwa.
Tel / Fax. 0094 112650492 Email: stl.srilanka@gmail.com

Membership Application / Renewal form

Secretariat use only

Date Received:		Mem.status:		MemNo: SLSTL	Approved by:	
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1) Personal information:

i) Title: Prof. Dr. Mr. Ms. Rev. Other

ii) Full name:

iii) Last name with initials:

iv) Gender: vi) NIC No.: vii) Age (in years):

2) Workplace information:

i) Position/Occupation: ii) From (year):

iii) Institution/University:

iv) Faculty: v) Department:

3) Contact information:

i) Address for Correspondence:

ii) Work phone Number: iii) Home phone Number:

iv) Mobile phone Number: v) Fax Number:

vi) E-mail # 1: vii) E-mail # 2:

I grant permission to circulate my contact details among members (my e-mail address, mobile number)

4) Qualification (indicate Year & university with copies of evidences attached):

i) Academic degree (latest) & year:

ii) Academic degree & year: (if any other):

iii) Academic degree & year: (if any other):

iv) Any other relevant qualification.:

5) Professional works (Research, Publications, Project reports, Book chapters, etc) carried out within the last 3 years & Year:

i)

ii)

iii)

iv)

v)

6) Areas of interest & any other relevant information pertaining to this application:

6) Membership Declaration:

I agree to uphold the mission, values and aims of SLSTL (as given in the Constitution),

I wish to "Individual Member" for the year

Accordingly, I do agree to pay² the sum of Rs. as my membership fee¹.

Note:

- (1) You can pay the membership fee [Membership fee: (1) Joining fee - Rs. 2,000/- & (2) Annual fee - Rs. 1,000/-]:
- (a) by 'Account Payee' crossed cheque drawn in favour of "Sri Lanka Society of Transport & Logistics" or
- (b) via bank deposit (Bank of Ceylon- Saving Account No: 80292689) stating a Ref.No as Membership No, if you already have Mem.No.
- (2) Duly filled application form along with the cheque or copy of bank slip can be posted to address stated at the top.
- (3) Application should be proposed by two existing members of SLSTL.

Declaration:

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately.

Signature of applicant: _____

Date:

Proposer³ - 1: Name of proposer: _____

Signature: _____

Date:

Proposer³ - 2: Name of proposer: _____

Signature: _____

Date: