|  |
| --- |
|  Colored photo: passport size (3.5 cm x 4.5 cm without white border)  |

**INSTITUTE OF FOOD SCIENCE & TECHNOLOGY SRI LANKA (IFSTSL)**

**APPLICATION FOR MEMBERSHIP**

|  |  |
| --- | --- |
| **Name:** **Mr./ Ms./ Mrs./ Dr./ Prof.**  |  |
| **Date of Birth (DD/MM/YY)**  |  |
| **Occupation /Job Title**  |  |
| **Company /University**  |  |
| **Office: Postal Address**  |  |
| **Office: Telephone No(s).**  |  |
| **Office: Fax No.**  |  |
| **Office: Email Address**  |  |
| **Private: Postal Address**  |  |
| **Private: Telephone No(s).**  |  |
| **Private: Fax No.**  |  |
| **Private: Email Address**  |  |
| **Pls. Indicate (√) Preferred Contact Postal Address**  | **Office**  |  | **Private**  |  |
| **Areas of Your Academic /Professional Interests**  |   |
| **Educational Status** Please mention your highest academic qualification or current course of study: Note: attach copies of the certificates. Students may obtain letters from their respective university/ institute.  |
| **Experience in Food Industry** Please explain number of years, title of employment, etc. Note: attach copies of proof of experience    |
| **Additional Information** If you have any specialist skills, qualifications, knowledge or even just some specific interest or availability (time), that you are able to offer to assist with things such, Project Idea's, research, monitoring, content management or even just being able to get out and about to speak to people in your immediate area, then please mention them below:       |
| **Please Disclose any Involvement and Commitment You Have with any Other Organization or Group**     |
| **Please Select (√) the** **Applicable Membership** **Category**  |  |  |  **Fellow Member** **Associate Member**  **Corporate Member**  **Associate Corporate Member**  **Interim Member** **Student Member**  |
|    |

**I herewith agree to abide by the rules and regulations of IFSTSL.**

 **……………………… …………………………………**

 **Date Signature**

|  |  |
| --- | --- |
|  | **Administration Use Only**  |
| **Entrance Fee &** **Membership Fee** **Paid?**  |  | **Book No.**  |  |
| **Receipt No.**  |  |
| **Membership No:**  |  |
| **Start Date:**  |  |
| **End Date:**  |  |
| **…………………………..** **Date**  | **……………………………………………………………….. …………………………………..**  **Name Signature**  |

1. Please submit your duly completed application form with hard copies of the required documents to, the Institute of Food Science and Technology Sri Lanka (IFSTSL), No.21D, Vijaya Kumaratunga Mw (Polhengoda Gardens), Colombo-05, or email the scanned copies to ifstslinfo@gmail.com.

1. Postal submissions should be done only through registered post with a cheque or a bank paying slip of the entrance fee and membership fee payments.

1. For membership fee payments:

A cheque should be drawn in favour of “Institute of Food Science & Technology Sri Lanka”, and cross A/P only

or

deposit money into the following bank account and send the bank paying slip through registered post with the membership application form or WhatsApp the slip to 077 114 9397.

*Bank:* National Development Bank (NDB), Havelock Town *Account Number:* 101‐000151786

# For any clarification please contact,

Mrs. Sandhya Fernando

Phone: 077 114 9397 or 011‐7548770

Email: ifstslinfo@gmail.com

For additional information about IFSTSL, please visit www.ifstsl@org