

ශ්‍රී ලංකා පුරාවිද්‍යාඥයන්ගේ සභාව
தொல்பொருள் ஆய்வாளர்களின் இலங்கை கவுன்சில்
SRI LANKA COUNCIL OF ARCHAEOLOGISTS



SLCA

සාමාජිකත්ව අයදුම් පත
உறுப்பினர் விண்ணப்பம்
MEMBERSHIP APPLICATION

*Three copies of
white colour
background
Passport size
photograph should
be affixed here.*

Membership Category

- FELLOW
- MEMBER
- ASSOCIATE MEMBER
- REGISTERED MEMBER
- STUDENT MEMBER

1	Full name	Rev/Prof/ Dr/Mr/Ms	
		<i>English</i>	
		<i>Sinhala/Tamil</i>	
2	Last name with initials		
	<i>English</i>		
3	Address		
	<i>English (for the purpose of correspondence)</i>		
		<i>Sinhala/Tamil</i>	
4	Affiliated Institution		
5	Telephone	Office	
		Mobile	

6	Email	<input type="text"/>
7	N.I.C. Number	<input type="text"/>
8	Date of Birth	<input type="text"/> <input type="text"/> <input type="text"/>

PROFESSIONAL EXPERIENCE

Professional experience including Positions held (institutional/ professional) or research: *(Please provide documentary evidence)*

Appointment or Position held	Organization	From	To
a).			
b).			
c).			
d).			
e).			

If above space is not adequate, please use a separate page with above title and format

ACADEMIC QUALIFICATIONS

(Please provide documentary evidence)

Institution	Degree/Diploma/Certificate Course	From	To

If above space is not adequate, please use a separate page with above title and format

I hereby declare that the above information is accurate and correct for the best of my knowledge.

.....
Date

.....
Signature

RECOMMENDATIONS: *(Only Incorporated Members can give the Recommendation)*

Name	SLCA Category	Registration No.	Signature
a).			
b).			
c).			

Names of Incorporated members could be obtained from the SLCA office at the Department of Archaeology.

(Office Use Only)

Approved		Category	
Not Approved		Reason	
Signature:			
Date:			
(Chairperson/Membership Committee)			
Signature:			
Date:			
(Chairperson/Member of the BARE*- for Fellow Applications only)			
Admitted			
President/SLCA			
Official Stamp			

* BARE: Board of Archaeological Education