



Sri Lanka College of Venereologists

Telephone: +94 (011) 2696433, +94 (011) 2667029, +94 (011) 2667163 / Fax: +94 (011) 5336873
Email: venereologists.lk@gmail.com, Web: http://www.slcvn.org, Reg No: GA 2433

MEMBERSHIP APPLICATION FORM

I wish to apply for membership of the Sri Lanka College of Venereologists under the category of (*tick relevant cage*) Affiliate Membership Associate Membership Full Membership

For applicants of Affiliate or Associate membership: Please mention whether you require annual membership or life membership (*tick relevant cage*) Annual Membership Life Membership

1. Applicant's Surname

2. Given Names

3. Address and contact details at home and work place

	Home	Work
Address

Tele (fixed)
Mobile
Email

4. Date of birth 5. Gender

6. Sri Lanka Medical Council Registration Number (SLMC Reg. No.):

7. Professional qualifications/MBBS/PgD/MD/Other

Qualifications	University/Institution/College	Year obtained
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.....
.....

(Submit documentary evidence of your medical qualifications with copies of certificates, documentary evidence of board certification and short CV)

I certify that I shall not misuse my membership status in the Sri Lanka College of Venereologists

.....
Applicant signature Date

I declare that the candidate is known to me and that the information presented herein is accurate. I am not aware of any disciplinary or professional conduct issues that might affect the candidate's suitability as a college member. (*Proposer and Seconder should be members of the Sri Lanka College of Venereologists*)

.....
Proposed by Signature Date

I declare that the candidate is known to me and that the information presented herein is accurate. I am not aware of any disciplinary or professional conduct issues that might affect the candidate's suitability as a college member. (*Proposer and Seconder should be members of the Sri Lanka College of Venereologists*)

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Proposed by Signature Date



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Details on membership categories and eligibility criteria

Affiliate Member

Those who fulfil the following eligibility criteria, can apply for the affiliate membership of the college

- (a) Sri Lanka Medical Council (SLMC) registration as a medical practitioner
- (b) Training or experience for at one least year in Venereology OR
- (c) Those who have enrolled in to the Diploma in Venereology training programme

Associate Member

Those who fulfil the following eligibility criteria can apply for the associate membership of the college

- (a) Sri Lanka Medical Council (SLMC) registration as a medical practitioner AND
- (b) Recognized postgraduate medical qualification acceptable to the council of the college AND
- (c) Training or experience for at one least year in Venereology.

Ordinary Member

Those who fulfil the following eligibility criteria, can apply for the ordinary membership of the college and are entitled to use the MSLCV post nominal

- (a) Sri Lanka Medical Council (SLMC) registration as a medical practitioner AND
- (b) Recognized doctorate postgraduate medical qualification in the field acceptable to the council AND
- (c) Be a board certified consultant in a field acceptable to the council of the college

Membership fees

Affiliate member (AFM)	1,000 LKR per annum, Life membership 2,500 LKR
Associate member (ASM)	1,000 LKR per annum, Life membership 2,500 LKR
Ordinary member (OM)	5,000 LKR on admission (includes life membership)

Cheque should be drawn in favour of "Sri Lanka College of Venereologists" and crossed A/C payee only
(Acc. No. 0001781307, Bank of Ceylon, Regent Street branch, Colombo)

Office use only

Paid in cash/Cheque Rs..... Cheque number.....

Receipt number and date.....

The council accepted the application on:

Signature of the President/Secretary:Date:

Membership Number:	
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