



## APPLICATION FOR MEMBER SHIP OF ALUMNI ASSOCIATION OF NATIONAL INSTITUTE OF PLANTATION MANAGEMENT

Member Number .....

1. Name with Initials : .....

2. Full Name : .....

3. NIC No. : .....

4. Address :

(a) Official : .....

(b) Residential : .....

5. E mail Address : .....

6. Telephone No :

(a) Official No : .....

(b) Mobile No : .....

7. Membership Number ( If you already member ) .....

8. Membership category Requested (✓)

i). Life membership

ii). Honorary membership

iii) Full membership

iv). Associate membership

v). Student membership


9. Diploma/Certificate Courses Details Completed at NIPM

Diploma/Certificate Courses Name	Year Completion

10. Number of years' Experience in Planting : .....

I hereby declare that the details furnished above are true and correct to the best of my knowledge

.....  
Date

.....  
Signature

11. Review of the Executive committee (Office use only)

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