



THE INSTITUTE OF VALUERS OF SRI LANKA

(Incorporated by Law No.33 of 1975 as amended by Amended Act No. 9 of 2019)

ROOM NO.05, SECOND FLOOR,
PROFESSIONAL CENTER, OPA
NO.275/75, PROF. STANLEY WIJESUNDARA MAWATHA,
COLOMBO 07

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Please affix
one passport
size recently
taken colour
photograph

APPLICATION FOR ENROLMENT AS A CORPORATE MEMBER

Use block letters to fill this application

Grade of Membership sought			
Relevant Section under which membership is sought	Schedule B (1) (a)		Schedule B (2) (a) & (c)
	Schedule B (1) (b)		Schedule B (2) (a) & (d)
	Schedule B (2) (a) & (b)		Schedule B (3) (a) & (b)
Name with Initials: (Dr. / Mr. / Mrs. / Miss)			
Name in Full:			
Date of Birth:	(Y.....M.....D.....)	NIC No:	
Permanent Address:			
Communication Details: (All correspondence will be sent to the address and/or e-mail mentioned here)	Address:		
	E-mail:		
Telephone:	Residence / Office	Mobile	WhatsApp
Place of Work :			
Address:			
Current position:			

Name of Employer / Supervisor:				
Whether Full Time or Part Time :				
Office Contacts:	Telephone	E-mail	Web Address	
Membership of other professional Organizations/ institutions/ Societies/ Registered Companies:				
Payment details of Application fee: Entrance fee: Membership fee:	Mode of payment	Date of payment	Receipt No	Amount

Academic qualification as mentioned - Schedule B of the IVSL Law No. 33 of 1975 as amended by Act No. 09 of 2019 (Attach certified copies of certificates)

Period of Study		Name of the Institution	Classification of Institution	Qualification Awarded	Date of Award
From	To				

Other Academic and Professional qualification (Attach certified copies of certificates)

Period		Name of the Institution	Classification of Institution	Qualification Awarded	Date of Award
From	To				

IVSL Membership Details (Attach certified copies of certificates)			
Period		Category of Membership	Membership No.
From	To		

Any other Skills & Capacities

Any other Information & Remarks

Declaration by the Applicant:

I, (Applicant’s name) hereby declare that the information and particulars given above are true and accurate. I understand that declaration of false, insufficient, incorrect information will result in the rejection of the application. I also understand that IVSL retain the right to request for further information at the time of processing this application.

I also agree to abide by the Rules, Regulations, By-laws, Code of Conduct and Code of Ethics of the IVSL. I give an assurance that I will refrain from involving in any manner in social or other media damaging the image of the Institute, profession or any professional. I also understand and agree that any breach of the above will result in an impartial inquiry and follow-up Disciplinary Procedures. I am aware that if I found guilty, my membership in any category of Membership of the Institute may be suspended/cancelled/dis-enrolled by the Council. The decision to accept or reject this application and monitoring your conduct during the period by the Council of the Institute is final and conclusive.

Signature:.....

Date:.....

Recommendation: (Two members of the Council or by four members of the Institute of whom one shall be a Fellow Member, one shall be a Professional Associate Member and not less than two shall be members enrolled in the grade in which the applicant seeks enrolment.)

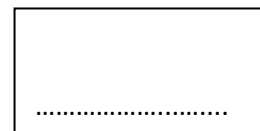
We recommend Dr./Mr./Mrs./Miss. as a suitable person to be enrolled as a Member of the Institute of Valuers of Sri Lanka.

1. Name: Membership Grade & No: Signature: _____ Date: _____	2. Name: Membership Grade & No: Signature: _____ Date: _____
3. Name: Membership Grade & No: Signature: _____ Date: _____	4. Name: Membership Grade & No: Signature: _____ Date: _____

Affidavit by the Applicant:

I (Applicant's name) of (address)
 do hereby sincerely and truly declare and affirm / swear that the particulars furnished by me in this Application are true and correct to the best of my knowledge.

Sworn / Affirmed before me



at on this

Affix Rs. Stamp

..... day of, 20.....

Justice of Peace

For Office Use Only			
Application received on:		submitted to MC on:	
Recommendation of MC:			
Decision of Council:			
Membership No:		Letter issued on:	