



D. S. Senanayake College **Old Boys' Association** **Application for membership**

Batch	Membership Number
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Please fill in Block Capitals

☐ Life

Personal Data	Name in Full (Please Underline Surname)			
	Date of Birth	N.I.C No.	Issue Date	
	Permanent Address (Number & Street)			
		City	Postal Code	
	Residential Telephone Number	Residential Facsimile Number(s)	Mobile	
	E-mail / Website			
<input type="checkbox"/> Civil Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced Number of Male Children <input type="checkbox"/> Parent of D.S.S				
Details of Study at D.S.S	Period of Study at D.S From	To	Batch	Admission No.
	Academic Achievements <input type="checkbox"/> Scholarship Examination <input type="checkbox"/> G.C.E(Ordinary Level) (Year:) <input type="checkbox"/> G.C.E (Advance Level) (Year:)			
	Leadership Achievements <input type="checkbox"/> Junior Prefect (Year :) <input type="checkbox"/> Senior Prefect (Year:) <input type="checkbox"/> Head/Deputy Head Prefect (Year)			
	Extra Curricular Achievements			
	Sports Achievements			
Higher Education	Details of higher or professional Education Achieved with Details of Scholarship (if any) and Memberships of Professional Bodies			
	Name of Degree/ Diploma	Institution	Details of Diploma / Degree	Year
Official	Place of Work			
	Designation			
	Official Address (Number & Street)			
		City	Postal Code	
	Telephone Numbers	Facsimile		
	E-mail / Website			
Declaration	<p>I declare that the details furnished by me above are true and correct and that the documentary proof forwarded by me is authentic to the best of my knowledge and belief. I understand that the decision of the General Committee on approval of my application is final. Further I understand that if any of the details furnished by me, or the documentary proof forwarded by me are found to fraudulent, the General Committee of the D.S.S.C – O.B.A. Reserves the right to terminate my member ship as and when it deem fit.</p> <p>..... Signature of Applicant</p> <p>..... Date</p>			

Recommendations	Proposer	Name			
		Membership No		Issue Date	
		Service <input type="checkbox"/> Executive committee <input type="checkbox"/> General Committee <input type="checkbox"/> Sub Committee (Please Specify)			
		I hereby Propose Mr.....of batch To be enrolled as a life/ordinary member of the D.S.Senanayake College old Boy's Association.			
	Signature		Date		
	Secondor	Name			
		Membership No		Issue Date	
		Service <input type="checkbox"/> Executive committee <input type="checkbox"/> General Committee <input type="checkbox"/> Sub Committee (Please Specify)			
I hereby Second the, Mr.....of batch To be enrolled as a life/ordinary member of the D.S.Senanayake College old Boy's Association.					
Signature		Date			

Membership Card Received	Signature	Date
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For Office Use Only

For Office Use Only	Details of Documentary Proof			
	<input type="checkbox"/> School Leaving Certificate	<input type="checkbox"/> Sports Certificate	<input type="checkbox"/> Other (Please Specify)	
	<input type="checkbox"/> Character Certificate	<input type="checkbox"/> Education Certificate		
	Application Checked by	Signature	Certificates Authenticated by	Signature
	Submitted for General Committee Approval on the General Committee meeting Held			
	Application Approved/Rejected due to		Date	
President		General Secretary		

PLEASE NOTE THAT THE FOLLOWING IS REQUIRED TO PROCESS THE APPLICATION

1. Copy Of the National Identity Card
2. Copy of the Character Certificate/Living Certificate
3. Two Passport Size Photographs(Colour)
4. Life Membership Free 2,250.00



Disk No:
Date:
D.S.O.B.A. / 130

1. Full Name With Initials

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