



ALUMNI OF THE FACULTY OF COMMUNICATION AND BUSINESS STUDIES (AFCBS)
TRINCOMALEE CAMPUS, EASTERN UNIVERSITY, SRI LANKA

MEMBERSHIP APPLICATION FORM

Full Name: Dr. /Mr. /Ms.

Private Address:
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Phone: Mobile: Email:.....

Present Position:
Organization/Institution:
Year of Experience:
Official Address:
.....

Phone: Mobile: Email:.....

Degree: BSc BA

Field of Specialty: MKT HRM AC&F Inf.Mgt BA.Lang BA.Com

Year of Graduation in the Faculty:

Class: 1st class 2nd Upper 2nd Lower Overall GPA:

Professional Qualifications:
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I hereby make an application to join the Alumnae of the Faculty of Communication & Business Studies, Trincomalee Campus, Eastern University, Sri Lanka as a Life/ Associate member and I agree to abide its rules and regulations. I enclose herewith the subscription fee for current year (.....)/ Life Membership.

Date:.....

Signature:.....

(FOR OFFICE USE ONLY)

Approved Membership:

Life Member

Associate Member

.....
President

.....
Secretary

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