

Date:

To: The Secretary,
Sri Lanka Veterinary Association.

Application for One Day Workshop on 'Towards Increasing Fresh Milk Production in Sri Lanka'

1	Name of the applicant (with initials)				
2	Full Name				
3	Address				
4	Contact details Tele: Email:				
5	Year of graduation (BVSc)				
6	Registration number of the Veterinary Council of Sri Lanka (VCSL)				
7	Are you a member of Sri Lanka Veterinary Association (SLVA) (✓)	Yes		No	
		Life member		Ord. member	
8	Current Occupation				
9	Address of the work place				
10	Work experience (years)				
11	Are you working for the government service?	Yes		No	
		If yes, for how many years			
12	Will you be able to obtain leave for participating this course?	Yes		No	
13	Reasons for your motivation to apply for this workshop 1. 2. 3.				
14	Any other remarks (if any)				

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Signature of the applicant

For office use only

Selected/Not selected for the course

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President/Professional Development Committee, SLVA

Email: secretary@slva.org

Post: Dr. K.G.J.S. Disnaka, Secretary, Sri Lanka Veterinary Association, No.68, Gatambe, Peradeniya

Tele: 0773782138