



## APPLICATION FORM FOR MEMBERSHIP

Mail to: Country Coordinator,  
Dept. of Agricultural Engineering,  
Faculty of Agriculture,  
University of Peradeniya  
Phone: 081-2395453 / 077-7341735  
081-3998975  
E mail: s\_pathma@yahoo.com  
capnet.lk@gmail.com  
www.capnetlanka.lk

1. Full Name:  
Prof. /Dr. / Mr. /Mrs. /Rev.

2. Home Address:

3. Official Address:

4. Contact Numbers:

Home

Office

Mobile

Fax

E-mail address

5. Academic  
Qualification:

6. Current  
Occupation:

7. What are your interested areas in contributing to Cap-Net Lanka?  
(Please tick the appropriate box/boxes)

Capacity Building	<input type="checkbox"/>	Research	<input type="checkbox"/>	Administrative	<input type="checkbox"/>
Dissemination	<input type="checkbox"/>	IT	<input type="checkbox"/>	Coordinating programs	<input type="checkbox"/>
Advocacy	<input type="checkbox"/>	Networking	<input type="checkbox"/>		

Other, specify .....

8. Briefly explain in which ways you would like to contribute to Cap-Net Lanka?

9. What are your previous experiences on the above mentioned interested areas?

I would like to be a member of the Cap-Net Lanka and provide the services as mentioned above.

Signature of Applicant: -----

Date: -----

----- **For official use only** -----

Membership request accepted / not accepted. If not accepted reason: -----

-----

Signature: -----

Date: -----

Country Coordinator / Cap-Net Lanka