

Date :

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THE ORGANISATION OF PROFESSIONAL ASSOCIATIONS OF SRI LANKA

Professional Centre 275/75 Prof. Stanley Wijesundera Mw, Colombo 07

Telephone : 0112580268, 011255217 **Fax :** 0112559770

E-mail : opasrilanka@gmail.com **WebSite :** <http://www.opasrilanka.org>

Please refer eligibility criteria for membership of OPA stated on the reverse hereof

1. Name of the Association :
2. Profession :
3. Registered address :
4. Telephone No: Fax: Email:
5. Date of the Association established : Year Month : Date :
6. Membership details (as of the date of application)

Class of Membership	No. of Members	Minimum Educational/Professional Qualifications
6.1
6.2
6.3
6.4

7. Membership class/classes eligible for membership of OPA Forum

8. The following documents duly certified by the President or Secretary of the Association are attached (The application will be rejected if not accompanied by the these documents)

- A Copy of the Constitution/ Memorandum and Articles of Association
- A copy of the code of Ethics
- A copy of the By – Laws
- A list of names of present Office Bearers & Executive Council
- A copy of the resolution passed at a Annual General or Special General Meeting accepting the objectives and principles of the Organisation of Professional Associations of Sri Lanka

9. DECLARATION

We hereby declare that the information given above are true and correct to the best of our knowledge. We accept that membership of the OPA is available only to Professional Bodies qualifying under Chapters 4.2(a), 16.5 & 16.6 of the OPA Constitution.

.....
President
Date :

.....
Secretary
Date :



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**THE ORGANISATION OF PROFESSIONAL ASSOCIATIONS OF SRI LANKA (OPA)
ELIGIBILITY CRITERIA FOR MEMBERSHIP TO ENFORCE AS A MEMBER ASSOCIATION.**

Membership of the OPA is available to professional bodies qualifying as per under Chapters 4.2(a) , 16.5 and 16.6 of the OPA Constitution.

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01	Application Received	Date	Signature of Centre Director		
02	Membership Committee	Recommended/ Rejected	Date	Signature of Chairman, Membership Committee	
03	Executive Council	Approved / Rejected	Date	Signature of Centre Director	
04	Forum	Ratified/Rejected	Date	Signature of Centre Director	
05	General Secretary	Endorsement	Date	Signature of General Secretary	
06	Notification to the Applicant		Date	Signature of General Secretary	
07	Initial Annual Payment of Membership	Date	Amount	Cash / Cheque	R/N

