

THE INSTITUTION OF ENGINEERS, SRI LANKA

APPLICATION TO REGISTER AS A CONSULTANT

Personal Information

Full name: _____

Postal address: _____, _____, _____

Home Phone: (____) _____ Office Phone: (____) _____

Mobile Phone: _____ Fax: (____) _____

E-Mail Address: _____ Membership Number: _____

Qualifications

Academic Qualifications: _____

Professional Qualifications: _____

Discipline: Agricultural / Chemical/ Civil/ Electrical / Electronics/ IT/ Marine/
Mechanical/Mining (Please delete whatever is inappropriate)

Specialization/s: (Please tick the appropriate cages)

Bridges, highways roads and tracks	+
Structures	+
Project Management	+
Water supply, sewerage and drainage	+
Environmental Engineering	+
Irrigation engineering	+
General including litigation, insurance, contract documentation	+
Plant & machinery	+
Marine engineering	+
Electrical installation	+
Lifts	+
Generators	+
Electrical power generation & distribution	+
Lightning protection	+
Electronics & telecommunications	+
Air conditioning	+
Aviation	+
Others (please specify)	+

Work Experience

Number of years of service during which consultancy work has been carried out: _____

Any other relevant information

I declare that the information provided above is true and correct.

Signature

Date: