**JAPANESE GRADUATE’S ALUMNI ASSOCIATION OF SRI-LANKA**

**JAGAAS**

**MEMBERSHIP APPLICATION FORM**

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| |  |  |  |  | | --- | --- | --- | --- | | FULL NAME (Dr/Mr/Miss/Mrs  (Underline Surname) | | | | | PERMANENT ADDRESS | TEL | | | | FAX | | | | E-MAIL | | | | MOBILE | | | | PRESENT EMPLOYMENT/POSITION |  | | | | OFFICIAL ADDRESS | TEL | | | |  | FAX | | | | E-MAIL | | | | DATE OF BIRTH | |  | | | ACADEMIC QUALIFICATIONS | |  | | | ACADEMIC QUALIFICATIONS OBTAINED IN JAPAN | |  | | | University | | Period | Qualifications | |  | |  |  | | SIGNATURE | | | | | Life membership fee of Rs. 1,000/= could be paid by a cheque drawn on JAPANESE GRADUATES ALUMNI ASSOCIATION OF SRI-LANKA or money credited to A/C. no. 210-1-001-4-5622531 at People’s Bank Kollupitiya, co-op House Branch. Contact No. 0777-602321 (Treasurer) | | | | |  | | |  | |