

Sample application:

**Nomination form for Fellowship of the Sri Lanka College of Radiologists**  
**(FSLCR)**

We nominate the following for award of fellowship of Sri Lanka College of Radiologists

Name of nominee in full: .....

Home address of nominee: .....

Date of obtaining full membership of Sri Lanka College of Radiologists: .....

Full name of member / fellow proposed: .....

Signature: 

Signature and stamp
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Full name of member / fellow seconded: .....

Signature: 

Signature and stamp
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Please submit this application to the office of Sri Lanka College of Radiologists, along with the curriculum vitae of nominee with adequate documentary evidence to confirm the accomplishments of the candidate under the criteria for which the nominee is being proposed.

- positions of prominent leadership, national or international
- national awards for outstanding academic or research work
- contributions to academic and research work
- Trainer in Radiology/Member of the council
- Attendance at the college activities - AGM/Annual academic sessions/Clinical meetings
- publications

Sample application:

Date.....

President,

Sri Lanka College of Radiologist,  
Colombo.

Dear Sir,

Nomination form for fellowship of the Sri Lanka College of Radiologists (FSLCR)

I herewith submit the nomination form to be submitted for the purpose of obtaining a fellowship of Sri Lanka College of Radiologists for council approval.

Thanking you,

Signature and stamp
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Dr. ....

Consultant Radiologist