

APPLICATION FORM

Full Name:		<input type="checkbox"/> Male	<input type="checkbox"/> Female
Date of Birth:	Place of Birth:	Mother's Name:	
Civil Register Number:	Place:		
Marital Status: <input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Divorced	<input type="checkbox"/> Separated <input type="checkbox"/> Widow
Wife/Husband's Name:	Number of Children:		

Education Status:	Professional Status:
Education Level: <input type="checkbox"/> Primary <input type="checkbox"/> Supplementary <input type="checkbox"/> High School /Secondary <input type="checkbox"/> Professional <input type="checkbox"/> Academic <input type="checkbox"/> Postgraduate Specialty: School/Institute/University: Year of Graduation:	Type of Work: <input type="checkbox"/> Employee <input type="checkbox"/> Craftsman <input type="checkbox"/> Employer/Entrepreneur <input type="checkbox"/> Unemployed Professional Sector: Company: I work since:

Membership of the applicant in other associations:
<input type="checkbox"/> I am not affiliated to any of the above <input type="checkbox"/> I am a member of _____ Since: _____

Complete address and contact details:
Country: _____ City: _____ Street: _____ (Building) P.O. Box: _____ E-mail: _____ Home Telephone: _____ Office Telephone: _____ Fax: _____ Mobile: _____ Identifier Name (s): _____

I understand that it is my own responsibility that all the above information is correct. I also confirm that I have read the rules and regulations and statutes of the Assembly of the Levant Desalination and I am fully aware of its contents. I pledge that I, in case of acceptance of my application, I will comply with all obligations incumbent for the associate members.

Name: _____
Signature: _____

Date: _____

Terms of membership of the Levant Desalination Association:

Terms of membership are:

- Person above the age of 21, having his civil rights and not convicted of a felony or misdemeanor indecent.
- Is a legal entity registered and represented by an authorized representative.
- Conforms to the statute and the rules of the assembly and contributes to achieving its goals.

Attachments:

- Passport or ID Copy
- Judicial record
- 2 passport size photographs
- Any information the applicant wishes to file (CV, achievements)

Administrative Section:

Identifier recommendations:

Identifier 1:

Name:

Recommendations:

Date :

Signature :

Identifier 2:

Name:

Recommendations:

Date:

Signature

Administrative Committee's Decision:

Accepted

Not Accepted

Record/File No.:

Record/File date: