

Application form for Expression of Interest to become a member of an Academy Advisory Body

Download form from Academy website.

The form can be extended for completion. After completing and signing this form should be sent via e-mail to mail@acslm.ie with Subject Title; [Expression of Interest Academy Advisory Body](#).

First Name: *

Last Name: *

Academy Member Number: *

Fellowship : Yes No *

Email Address: *

Job position: *

Advisory Body: *

Expertise relevant to the advisory body: *

Work Experience (short bio): *

Any time commitments that may impact your level of engagement: *

Declaration of any conflicts of interest: *

Signature

Date:

Please complete all sections.