

Application for Diploma Courses – 2017/2018																				
Professional Diploma in Counselling									Affix here Stamp Size Color Photo											
Diploma in J	Diploma in Journalism																			
01. PERSONA	AL DA	٩ТА											 			L				
Status		Re	ev.	M	r.	M	rs.	M	iss]										
Name in full (use block lette	ers)																			
Name with Initials																				
Permanent Address																				
Address for Communicat	ion																			
E-mail Addre	ess												 							
Telephone									-	Mol	bile									
NIC No] [Civ	il St	atus					Sex		Male ^F emal	
Date of Birth	Da	te	M	ontl	h	Y	ear				s at t Ig da		Da	ys	Ν	lon	ths		Yeaı	:S
DS Division District Province Nationality																				

02. EDUCATIONAL QUALIFICATIONS:

(a) *G.C.E.* (*O/L*) *Examination* (attach copies of certificates)

Year & Month of the Examination:.....Index No:....

No.	Subjects	Grade	Subjects	Grad
01				
02				
03				
04				
05				

(b) G.C.E. (O/L) Examination (attach copies of certificates) (if needed for 2nd attempt)

Year & Month of the Examination:.....Index No:....

No.	Subjects	Grade	Subjects	Grad
01				
02				
03				
04				
05				

(c) G.C.E. (A/L) Examination (attach copies of certificates)

Year & Month of the Examination:.....Index No:....

No.	Subjects	Grade / Marks				
01						
02						
03						
04						
05	General English					
06	Common General Test					
	Aggregate Marks / Z Score					

04. APPLICATION FEES

Amount Rs:	Date of Payment:
Name of the Bank: People's Bank	Branch:

Affix the PIV here

05. DECLARATION

The following documents are annexed with the application. Please tick($$) the cages						
i. Photocopy of the Birth Certificate						
ii. Photocopy of GCE A/L or O/L results or Professi	onal Qualifications					
iii. Three copies of recent colour Photograph of new p	bassport size					
iv. Pay- In Voucher (PIV) endorsed by the People's Ba	ank					
v. Photocopy of National Identity Card (Certified)						
vi. Affidavit, if there is a difference in the name						

I certify that the above information is true and correct. In the event of my application for registration being accepted, I shall abide by all the regulations governing to the external candidates of the university. I also understand that misrepresentation in the application will cause the rejection or revoking acceptance for admission at any stage.

Date:

Signature of Applicant

06. ATTESTATION

I certify that the above applicant who is a past pupil / teacher of my school / an officer in my office /known to me personally placed his/her signature above in my presence today.

Date:

Signature of the Attester

Name, Designation & Address	
	(Official Stamp)

Note:

Dully filled application with relevant documents must be handed over / mailed under registered cover to **reach the following Address** <u>before the closing date (16.04.2017):</u>

Assistant Registrar Center for External Degree and Professional Learning South Eastern University of Sri Lanka University Park Oluvil # 32360

For Office use only

Status of the Application