



Centre For External Degrees & Professional Learning (CEDPL)
South Eastern University of Sri Lanka
University Park, Oluvil.
Tel: +94 67 20 52801

APPLICATION FOR REPEAT EXAMINATION

(Please tick your options “✓”)

COURSE:	BA	<input type="checkbox"/>	BBA	<input type="checkbox"/>	B. Com	<input type="checkbox"/>
YEAR:	First Year	<input type="checkbox"/>	Second Year	<input type="checkbox"/>	Third Year	<input type="checkbox"/>
CANDIDATURE:	Proper	<input type="checkbox"/>	Fresh	<input type="checkbox"/>	Repeat	<input type="checkbox"/>
SEMESTER:	Semester- I	<input type="checkbox"/>	Semester- II	<input type="checkbox"/>	Medium	<input type="checkbox"/>
BATCH:	(i.e. 2014/2015, 2015/2016, 2016/2017, 2020/2021, 2021/2022)					<input type="text"/>

01. Registration No :

SEU	ES			
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 NIC No.

02. (i) Name with initials:

(ii) Full Name :

(iii) Present Address :

(iv) Contact No. :...../ (v) WhatsApp No:.....

(vi) E-mail ID :

03. Subjects applied for Examination

Subject Code		Subject Title
01		
02		
03		
04		
05		
06		

No of Subjects:Amount :..... Date of Payment:

Branch of Bank:

Exam Fee
Affix the **PIV University Copy** here

***Its should be paid at any branch of People's Bank
To the account No. 228 1001 6000 1692***

I certify that I have correctly entered all the particulars relevant to the application. I am aware that my application could be rejected for the reasons given in the general instructions and if the application is rejected, the University will not refund the examination entry fee paid by me. I am also aware that I will not be admitted to the examination hall unless I produce an Identity Card approved by the University. I have annexed with this application a receipt for payment of the prescribed fee.

.....
Signature of Candidate

.....
Date

For Office Use Only

Registered / Not registered for examination

Entries Checked By:.....

.....
Deputy Registrar/CEDPL