




Centre for External Degrees and Professional Learning (CEDPL)
South Eastern University of Sri Lanka (SEUSL)
University Park, Oluvil # 32360
Tel: +94 67 20 52801

Application for Provisional Certificate/Statement of Results

(Should be filled in **CAPITAL** letters)

| | | | |
|-------------------------|----------------------|--|----------------------|
| 01. Name of the Course: | <input type="text"/> | | |
| 02. Registration No: | <input type="text"/> | | |
| 03. Name with initials: | Mr. | Ms. | <input type="text"/> |
| 04. Full Name: | <input type="text"/> | | |
| 05. Address: | <input type="text"/> | | |
| 06. Date of Birth: | <input type="text"/> | 07. Age: | <input type="text"/> |
| 08. Contact No. | <input type="text"/> | 09.  No. | <input type="text"/> |

Fee for Provisional Certificate Rs. 600/- and fee for Statement of Results Rs. 250/-

I declared that the above particulars are given by me true and correct and also annexed herewith a PIV

Bank Payment Receipt No..... for the amount of Rs.

Signature of the Applicant:.....

Date:.....

FOR OFFICE USE ONLY

Above given Particulars from 01 - 07 are checked with his / her personal file
and found correct, Can be issued above request.

Date:.....

Subject in-charge

Approved / Not Approved

Date:

Deputy Registrar/ CEDPL

Result Statement sent by Registered post at the above address on

Received by hand;

Name:.....

Signature:

Regd. No: *SEU* / / / /

Date: