



<p style="text-align: center;"><b>Application for Professional Diploma in Counselling - 2022/ 2023</b></p>	<p><i>Affix here Stamp Size Color Photo</i></p>
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**01. PERSONAL DATA**

Status	Rev.	Mr.	Mrs.	Miss
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Name in full (use block letters)	

Name with Initials	

Permanent Address	

Address for Communication	

E-mail Address	
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Telephone	
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Mobile	
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NIC No	
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Civil Status	
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Sex	Male / Female
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Date of Birth	<b>Date</b>	<b>Month</b>	<b>Year</b>	

Age as at the Closing date	<b>Days</b>	<b>Months</b>	<b>Years</b>

DS Division	
District	
Province	
Nationality	

**02. EDUCATIONAL QUALIFICATIONS:**

*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	
<b>Aggregate Marks / Z Score</b>		

**03. PROFESSIONAL QUALIFICATIONS AND EXPERIENCE (Related only)**

**04. APPLICATION FEES**

Amount Rs:.....

Date of Payment:.....

Name of the Bank: **People's Bank**

Branch:.....

<p>Affix the PIV here</p>
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**05. DECLARATION**

<b>The following documents are annexed with the application. Please tick(√) the cages</b>	
i. Photocopy of the Birth Certificate .....	<input type="checkbox"/>
ii. Photocopy of GCE A/L .....	<input type="checkbox"/>
iii. Three copies of recent colour Photograph of new passport size.....	<input type="checkbox"/>
iv. Pay- In Voucher (PIV) endorsed by the People's Bank .....	<input type="checkbox"/>
v. Photocopy of National Identity Card (Certified) .....	<input type="checkbox"/>
vi. Affidavit, if there is a difference in the name .....	<input type="checkbox"/>

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:**

Duly filled application with relevant documents must be handed over / mailed under registered cover to reach the following Address **before the closing date (25.08.2022):**

**Deputy Registrar  
Center for External Degree and Professional Learning  
South Eastern University of Sri Lanka  
University Park  
Olivil # 32360**

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**For Office use only**

Status of the Application