

POSTGRADUATE UNIT (PGU) FACULTY OF ARTS AND CULTURE SOUTH EASTERN UNIVERSITY OF SRI LANKA

Employer Consent Form

Name of Applicant:	
NIC No. of Candidate:	
NOTE: To be completed by the Head of applicant if applicable.	the Institute/ Corporation/ Enterprise of the
Senior Assistant Registrar,	
Faculty of Arts and Culture,	
South Eastern University of Sri Lanka	
University Park	
Oluvil # 32360	
Forwarded. If selected, the applicant will be g program at the Faculty of Arts and Culture, Sou	iven permission to follow a postgraduate degree th Eastern University of Sri Lanka.
Address:	
	Signature of Head of the Institute/
	Corporation/ Private Enterprise
Designation:	
Date:	
	(Please affix official rubber stamp)