



**Department of Physics
University of Colombo**

**Application for the Admission to M.Sc. /Postgraduate Diploma Programmes
2008**

NAME OF THE PROGRAMME:

Applied Electronics

FULL NAME (Mr./Mrs./Miss/.....)

PERMANENT ADDRESS:

PHONE: FAX: EMAIL:

MAILING ADDRESS AND CONTACT NUMBER:

DATE OF BIRTH:

SEX: . Male. Female

CITIZENSHIP:

NATIONAL ID NO:

CURRENT EMPLOYMENT:

DESIGNATION:

NATURE OF DUTIES PERFORMED:

OFFICE ADDRESS:

PHONE:

FAX:

EMAIL:

EDUCATIONAL QUALIFICATIONS: (Please attach photocopies of certificates)				
Degree/Diploma	University/Institute	year	Class/Grade	subjects
EXPERIENCE IN THE RELEVANT FIELD: (Write the designation, nature of work and no. of years for each appointment held)				
ACADEMIC REFEREES: (Provide names and addresses of two non-related referees.)				
1.		2.		
INFORMATION ABOUT ANY OTHER STUDY PROGRAMS: If you are currently registered for any other study program at University of Colombo or any other institution, please give details below.				
I certify that the information furnished by me above is true and accurate to the best of my knowledge and I am prepared to abide by the rules and regulations governing the registration and awarding of M.Sc./Postgraduate Diploma of the University of Colombo.				
.....			
Signature of the Applicant		Date		

Duly completed application form together with a paying-in-voucher for Rs. 500/= paid to the University of Colombo, Account No. 086-100121189662 (This fee also can be paid to the shroff counter, University of Colombo before 3.00 p.m. on week days) should be sent to the Senior Assistant Registrar, Faculty of Science, University of Colombo, Colombo 3, on or before **15th November 2008**.