



Office use only

Rajarata University of Sri Lanka - Mihintale
Application for Postgraduate Diploma in Education Program (Weekend)
2023/2024 Intake - VI

Select the Centre:

Polonnaruwa - []

Mihinthale - []

1. Full Name : Rev./Mr./Mrs./Miss.-
.....
.....

2. Full Name in Sinhala :

3. Name with Initials :

4. Address : a. Official
b. Personal

5. Telephone : a. Official
b. Personal
c. e-mail

6. Date of Birth :

7. Gender : Male - [] Female - []

8. NIC No. :

9. Current Occupation :

10. Period of Service :

11. Academic Qualifications

Degree	University	Class	Effective Date

I certify that the above mentioned information is true and correct. I also declare that I do not expect to follow any other part time/ full time course, at the Rajarata University of Sri Lanka or to follow a full time course in any other Higher Education Institute.

Date:

Signature of the applicant:

Recommendation of the head of the institute

I recommend and forward herewith the application of Rev./Mr./Mrs./Miss.
.....
for the above postgraduate Diploma in Education Program.

Date:

Signature and frank:
(Principal/Director - Zonal Educational Office)

Here attached your receipt of the Application Fee