## Application for Short Courses Department of Animal and Food Sciences, Faculty of Agriculture

Course applied for:								Reference no:		
								Office use only		
	e fill following details	s in bloc	k lett	ers						
1.	Name with initials									
	(Rev./Mr./Mrs./Ms./	Other)								
2.	Full name									
3.	Postal address									
4.	Contact telephone number		M	Mobile			Residence		Office	
5.	Email address						<b> </b>			
6.	Date of birth D	M	Y	7.	Age	as at	applying date		Years	
8.	Gender $()$ Male			<u>l</u>			Female			
9.	NIC number			10.			Nationality			
11.	Educational qualifica	ations (P	lease	attacl	ı cop	ies of	•	rtifica	tes)	
11.1	G.C.E.(O/L)	<u> </u>							·	
	Subject		Grad	Grade Sub			iect		Grade	
	3						<u>,                                      </u>			
11.2	Other educational qu	alification	ons							
							Year complete	ed J	Results	
				studies				(	obtained	
								-		
								-		
								-		
11.3 Details on educational institute if a student (attach a copy of your							stude	nt identity card		
	if a student of Rajarata University of Sri Lanka)									
	School /University /Other		Course/program Year studying			in 1	Expected year			
								of completion		
12.	Any other relevant q	ualificat	ions							
					_					

## Rajarata University of Sri Lanka

13.	Details on present employment if any (attach a copy of your university identity card if											
	staff of Rajarata Ur	niversity of Sri I	_anka)	)								
	Name of Institute	Desi	gnatio	_			rience (no of years in this					
					positi	on)						
14.	Previous or current	s or current experience on the subject matters of the course applied (Please										
	give details)	- · · · · · · · · · · · · · · · · · · ·										
15.	Have you currently	_		•		Yes	No					
	·	ffered by the Faculty of Agriculture ( $$ )										
15.1	5.1 If "Yes" please give details											
	Course	se				Status						
			regis	tered								
							ed/Incomplete/ ongoing					
					_		omplete/ on	going				
17.	Which medium of i	ou S	Sinhala		English							
	prefer for this cours	* *										
18.	Any specific reason for attending this course											
19.	Any other relevant	information tha	t you	wish to	o inform							
Decla	ration by the applica	nt:										
	• • •		ars fur	nished	l by me are	e true	and accurate	to the best				
I do hereby certify that the above particulars furnished by me are true and accurate to the best of my knowledge. In the event of my application for registration being accepted, I shall abide												
-	rules and regulation				_	_	_					
Lanka												
Date:			Si	ignatur	e:							
For office use only												
01.	Recommendation	· · · · · · · · · · · · · · · · · · ·			nded/not	Sign	Signatures					
		Committee	reco	ommer	nded							
		2.Academic	Rec	omme	nded/not	ed/not Signature						
		Coordinator	recommended									
02.	Payment details	Amount (R	s.)		Date paid		Reference/receipt					
	Course fee											