001 PGIHS/STU/Form



## POSTGRADUATE INSTITUTE OF HUMANITIES AND SOCIAL SCIENCES (PGIHS) University of Peradeniya

## **Selection of Courses**

Academic Year: Semester: Semester:		
1.	Name of the Student:	Rev./Mr./Ms./Mrs
2.	Postal Address:	
	Telephone:	
	email:	
3.	Registration No.:	
4.	Degree Programme: (delete appropriately)	Doctor of Philosophy/ Master of Philosophy/ Master of Arts/ Postgraduate Diploma/ Other
5.	Subject/ Discipline:	
6.	Medium of Registration:	
7.	I would like to register for following courses in Semester	
	Course Code	Course Title
	1.	
	2.	
	3.	
	4.	
	5.	
	6.	
Date:		
Signature of the Student:		

## Instructions

- 1. Contact the Postgraduate Programme Coordinator in the discipline to obtain the list of courses to be offered in the next semester.
- 2. A minimum of 5 students are required to offer a course in a given semester.
- 3. Send the duly completed form to the Postgraduate Programme Coordinator in the discipline or to the following Address: Assistant Registrar, PGIHS, University of Peradeniya, Peradeniya, Sri Lanka. email: info@pgihs.ac.lk