

POSTGRADUATE INSTITUTE OF HUMANITIES AND SOCIAL SCIENCES (PGIHS) UNIVERSITY OF PERADENIYA SRI LANKA

CLOSING DATE OF APPLICATIONS 1									10) th Ju	ıne	202	3														
APPLI (for of						:																					
REGISTRATION NUMBER: (for official use only)																											
APPLICATION FOR ADM MASTER																			TE	DII	PL()M	A /				
)1. PR(OGR	AM	ME	API	PLII	ED:																					
Name of the degree with the Subjects							s											Medium									
- ,																											
Examp	le: M	A in	Econ	omic	s, Po	G Dip	loma	a in I	Pali																		_
Example: MA in Economics, PG Diploma in Pali 2. PERSONAL DATA Please use capital letters in completing sections 1.a and 1.b) 1.1 NAME OF THE CANDIDATE																											
(a) F	ULL	NA	ME	(Re	v. /	Mr	. / N	Ars.	/M:	s.)	(Ple	ase	leav	e oı	ne s	pac	e af	ter e	each	na	me)						
																										-	4
																											_
(b) N	AMI	E W	ITH	INI	TIA	LS																					٦
																											1
2.2 SEX				7					TIC Lan			Y					1										
Fema	le]	For	eign	Na	tior	nal															
]	If fo	rei	gn, :	spe	cify	the	Co	unt	ry o	f R	esio	len	ce							
2.4. PO	STA	L A	DD	RES	SS																						
																											_
																											J
2.5 NA	<u> </u>	<u>IA</u> L	<u>ID</u>	<u>N</u> O							_	2	2.6 l	P <u>A</u> S	<u>SP</u> C	<u>R</u> T	<u>N</u> O) <u>. (</u> F	<u>or</u> e	<u>ig</u> n	<u>N</u> a:	<u>tio</u> n	<u>al</u> s	<u>o</u> n	<u>ly)</u>		
) 7 DA1	re <i>(</i>	16 6	רסו	TLI																							

2.8. EMPLOYMENT DETAILS	5		
(a) Currently,	(b) If employed,		
Employed	Place of Work		
Unemployed	Position (Optional)		
3.1 TELEPHONE NUMBERS 3.1 TELEPHONE NUMBERS 3.2 E - MAIL 3.3 CONTACT PERSON FOR (a) Name (b) Relationship (c) Contact Numbers	Father/ Mother/ Spouse/ Children/		
04. HIGHER EDUCATIONAL	AND RESEARCH QUALIFICATIONS		
4.1 EDUCATIONAL QUALIFI	CATIONS		
		T	
Name of University/	Name of the Degree/ Diploma with	Year	Grade/ GPA/ Class
		Year	Grade/ GPA/ Class
Name of University/	Name of the Degree/ Diploma with	Year	
Name of University/	Name of the Degree/ Diploma with	Year	
Name of University/	Name of the Degree/ Diploma with	Year	
Name of University/	Name of the Degree/ Diploma with	Year	
Name of University/	Name of the Degree/ Diploma with	Year	
Name of University/ Institute	Name of the Degree/ Diploma with		Class
Name of University/ Institute	Name of the Degree/ Diploma with Subjects		Class
Name of University/ Institute 4.2 IF YOU HAVE COMPLET	Name of the Degree/ Diploma with Subjects		Class
Name of University/ Institute 4.2 IF YOU HAVE COMPLET (a) Title of Thesis	Name of the Degree/ Diploma with Subjects		Class

06. ARE YOU A REGISTERED STUD OR ANY OTHER UNIVERSITY?	DENT FOR ANOTHER DEGREE / DIPLOMA AT THIS	
Yes No	If Yes, Give details:	
07. ANY OTHER RELEVANT INFOR (Use additional sheets if necessar	MATION THAT YOU WISH TO INFORM	
08. DOCUMENTS SUBMITTED WIT	TH THIS APPLICATION	
Certified Copies of the Degree/Di	ploma Certificate/s	
Certified Copies of the Detailed D	egree/Diploma Certificate/s	
Certified Copies of the Birth Cert	ificate	
Service Letter (When requested)		
4 self-addressed stamped envelop	es (Rs.70.00 (Size – 22cm x 10cm) (Local applications only)	
09. DECLARATION BY THE APPLI	CANT	
	ded above is correct and I agree to abide by and be subject iversity of Peradeniya if this application is accepted for conside tree programme applied.	
Date	Signature of Applicant	

10. FOR OFFICE USE ONLY					
10.1 Programme Applied for	PG DIP]			
	Other]			
10.2 Documents Submitted:		_			
1 Certified Copy of Birth Co	ertificate		6	Service Letter	
2 Certified Copy of Bachelo	rs' Degree		7	Synopsis of Research Project	
3 Certified Copy of Bachelo Detailed Certificate			8	Two Referee Reports	
4 Certified Copy of Postgrad Diploma	duate		9	Transcript/s	
5 Certified Copy of Masters' Degree Certificate/s			10	Other Documents	
Remarks, if any					
Date				Signature of Subject Clerk	
10.4 RECOMMENDATION OF F	POSTGRADUAT	E PROG	RAM	Signature of Assistant Registrar ME COORDINATOR	
RECOMMENDED				NOT RECOMMENDED	
for admission to the programm	e applied under	· Section .		of admission crit	eria.
Date				Signature of Programme Coordinator	
10.5 APPROVAL OF THE BOAI	RD OF STUDY				
APPROVED				NOT APPROVED	
for admission to the program m					
If not approved, indicate r	easons:				
Date				Signature of Chairperson/ BoS	
10.6 APPROVAL OF DIRECTO The Application is approved/ N If not approved, indicate r	ot approved for	_			

Signature of Director/ PGIHS

Date