# UNIVERSITY OF COLOMBO, SRI LANKA CENTRE FOR THE STUDY OF HUMAN RIGHTS FACULTY OF LAW

## **APPLICATION FOR ADMISSION**

Application No:
App Admission Fee: (For office use only)

# Postgraduate Diploma in Child Protection and Rights 2023/2024 PGDip (CPR)

PERSONAL DATA		
NAME IN FULL (Underline the Last Name)	<b>:</b>	
NAME WITH INITIALS	<b>:</b>	
HOME ADDRESS	<b>:</b>	
OFFFICE ADDRESS	<b>:</b>	
Preferred address of cor	rrespondence (Please tick (✓) : Home: ☐ Office: ☐	
TELEPHONE	: HOME :	
	OFFICE:	
	MOBILE:	
E-MAIL	·	
DATE OF BIRTH	DATE / MONTH / YEAR	
NIC NO	<b>:</b>	
NATIONALITY	······	
SEX	: MALE FEMALE	

Language in which you we	ould like to follow the course:				
Sinhala	English	Tamil [			
	(Please tick ( $\checkmark$ ) one only.				
In case if the Centre is una your <b>2<sup>nd</sup> preference</b> ?	ble to offer the course in the language selecte	ed by you as above,	what is		
Sinhala	English	Tamil [			
	(Please tick ( $\checkmark$ ) one only.				
EDUCATIONAL QUALIFICATIONS:  University Education (Submit Certify Copies):					
University	Name of the Degree	<b>Effective Date</b>	Class		
Professional Qualification	s with full details (Submit Certify Copies:				
University/Institute	Qualification	Effective Date	Duration		
Any other Qualifications:					
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# **WORK EXPERIENCE**

Please list the employment background, **beginning with your** most recent position.

Date					
From D/M/Y	To D/M/Y	Name & Address of Employer	Position		
A brief descr	A brief description of current responsibilities:				
			•••••		
•••••	•••••				
Child Rights	related work ex	perience:			
•••••	•••••				
••••••	•••••				
Briefly describe your reasons for wishing to enroll in the PgDCPR Programme:					
•••••	•••••				
•••••	•••••		•••••		

### **REFEREES:**

You are required to nominate two non-related referees who can provide a letter of reference, written and signed by her/him personally. **Both letters are to be attached to this application**.

1)	
Name	
Position	
Institution/ Organization	
Telephone	
Email	
2)	
Name	
Position	
Institution/ Organization	
Telephone	
Email	
•	ticulars given by me are true and accurate to the best of my knowledge by the rules and regulations of the University of Colombo, Sri Lanka.
Date:	Signature of Applicant

Completed application form **must be submitted** together with the following:

- The paid bank slip of the Registration fee
- Copy of the National Identity Card (NIC)
- Birth Certificate
- The <u>certified copies</u> of the academic qualification/ professional certificate(s) mentioned in the application and two reference letters.

#### Notes:

- Course will commence only if it fulfills the minimum requirement in terms of number of the students
- Non-refundable application fee of Rs. 2000/- to be paid to any branch of the People's Bank, in favour of 'University of Colombo Main Collection Account' with the account code number given below.

Account Code Number: 335026100002

#### **Address:**

Director Centre for the Study of Human Rights Faculty of Law, University of Colombo, Sri Lanka 94, Cumaratunga Munidasa Mawatha Colombo 03