UNIVERSITY OF COLOMBO, SRI LANKA FACULTY OF GRADUATE STUDIES APPLICATION FOR ADMISSION

Application No:
Reg. No: 2019/MLRHRM/

Masters in Labor Relations and Human Resource Management (MLRHRM) 2019/2020

PERSONAL DATA			
NAME IN FULL (Underline the Last Name)			
NAME WITH INITIALS	······		
CONTACT ADDRESS			
OFFICIAL ADDRESS (If the official address differs from contact address)			
HOME ADDRESS	:		
(If home address differs from contact address	ss)		
TELEPHONE	:HOME :	OFFICE:	MOBILE:
E-MAIL (Block Capital)	:		
DATE OF BIRTH	:/19 DATE / MONTH / YEA		NIC NO:
NATIONALITY	······		CIVIL STATUS:
SEX	: MALE / FEMALE		
EDUCATIONAL QUA University Education (Subm	•		
University (If applicable)	Degree	Date of Award	d Class

<u>Profes</u>	sional Q	ualifications with full details:			
Qualif	ications	University/Institute	Course	Date of	Award
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WOF	RK EX	PERIENCE			
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Date (From -To		Name & Address of Employer		Position or Title)
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	•	ne above particulars given by me are tred to abide by the rules and regulation		•	_
Date:.					
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	Other ex	perience			Photog Her
	Ouglific	d for the Drogramma			
	Quaime	d for the Programme			
	Recomm	nendation of the selection Committee			