Application Form for Post Graduate Diploma/Masters Degree in Applied Statistics – 2017

Faculty of Science, University of Colombo, Colombo 03.

1. Name of the Master of Science Program: …….
2. Name in Full: (Dr/Mr/Mrs/Miss): …...……
   ……
3. Postal Address: …….
   ……..
   ……..
4. Telephone: ……Mobile: …..……
5. Email: ……..
6. Date of Birth & Age: ……
7. Educational Qualifications: ……..

		Subject(s)	University
(a)	Special Degree	…….	…….....
(b)	General Degree	…….	…….....
		…….	…….....
		…….	…….....
(c)	Class obtained	…….	

(d) Other Qualifications ……
……
……

(e) Experience …….
……
……

8. Present Occupation: …….....
   ……

9. Previous occupations held with period: ……...
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   ……

10. Names and addresses of two referees to whom reference could be made with regard to the suitability of the candidate.

1. ……..
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   ……..
   ……..

2. ……
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11. Have you been registered for a postgraduate degree/diploma or any other examination in the University of Colombo or any other university? If so give details :
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   ……

12. Please attach the bank payment slip for the application fee* of Rs. 2000/- in the cage given below.

* Application fee should be credited to "University of Colombo, Account No. 314051700005" at any **People's Bank** branch island wide.

I certify that the above information given by me are true and accurate to the best of my knowledge and I am prepared to abide by the rules and regulations governing the registration and awarding of Higher Degrees of the University of Colombo, Sri Lanka.

…… ……..

Date Signature

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