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Faculty of Graduate Studies, University of Sri Jayewardenepura

Application form for MBA/ M.Sc. in Management Program 2018 offered by the **Faculty of Management Studies and Commerce**

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Name in Full (Use block capitals)		Fi	rst Nan	ne													
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Permanent Address (if from previous																	
Official Add (If relevant)	ress																
Profession																	
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Date of Birth	Date		Month	1	Yea	r]	F		C No (YM							

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PART B – EDUCATIONAL QUALIFICATIONS FOR POSTGRADUATE DEGREES BY COURSE WORK (M.A(T)/MBA/MPM/M.Sc/PGD)

1. A CADEMIC QUALIFICATIONS OBTAINED (attach copies of certificates)

University	Period	Major Field	Degree/Diploma	Class-if any	Year

2. **PROFFESSIONAL QUALIFICATIONS** (attach copies of certificates)

Institution	Period	Field of Study/Training	Qualification	Year

3. WORK EXPERIENCE

Period	Position held	Nature of Work		

4 ANY OTHER QUALIFICATIONS (if any)

5. RESEARCH WORK (if any)

List research topics, and the nature of the research activity undertaken.

6. PUBLICATIONS (if any)

7. ACADEMIC AND /OR PROFESSIONAL HONOURS OR AWARDS (if any)

8. SELF ASSESSMENT OF PROFICIENCY IN ENGLISH

	Very good	Good	Fair	Weak
Reading				
Writing				
Conversation				

9. FINANCIAL ASSISTANCE

	Private	Sponsored	Grant	Fellowship	Studentship	University
						Teacher
How do you plan to finance your						
Postgraduate Studies?						
If sponsored – by whom?						
If Grant, give Grant name, total						
amount & Grant number.						
If other - indicate						

10. PREFERRED FIELD OF SPECIALIZATION (indicate the preference with 1, 2, 3,)

MSc. in Management	MBA (Human Resource Management)
Master of Business Administration (MBA)	MBA (Information Systems)
MBA (Accounting)	MBA (Marketing)
MBA (Business Economics)	MBA (Operations Management)
MBA (Finance)	

11. BRIEFLY DESCRIBE YOUR REASONS FOR WISHING TO ENROLL IN THE PROGRAM. (include your personal/ career interests)

12. GIVE NAMES AND CONTACT DETAILS OF REFEREES

1.	2.

I certify that the above information is true and correct. I understand that misrepresentation in the application will cause the rejection of application or revoking acceptance for admission at any stage.

Date.....

Signature of Applicant

Mail this application with relevant documents including Paying-in -voucher for Rs.1500 under registered cover to:

DEPUTY REGISTRAR, FACULTY OF GRADUATE STUDIES UNIVERSITY OF SRI JAYEWARDENEPURA, GANGODAWILA, NUGEGODA, SRI LANKA.

Telephone No: +94 112881551, Email: <u>deputyregiartrar.fgs@gmail.com</u>

Please write on the top corner of the envelope "Management"