



REGISTRATION FOR THE CERTIFICATE COURSE IN ENGLISH LANGUAGE FOR OFFICERS

Please fill this application form in “**BLOCK LETTERS**”

SECTION (A) – PERSONAL INFORMATION

1. Full Name: (Rev./Mr./Mrs./Miss.)

2. Name with Initial:

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3. Permanent Address:

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.....

4. Postal Address :(If different from the above)

.....

.....

5. District:

6. Province:

7. Contact No:

(Residence):

8. E-Mail:

9. Gender

Male: ☐ Female: ☐

10. Civil Status

Married : ☐ Unmarried: ☐

10. Date of Birth:

DD	MM	YYYY
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11. NIC No:

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SECTION (B) - EDUCATIONAL QUALIFICATIONS

- G.C.E Ordinary Level

Index No:		Year:	
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No	Subject	Grade
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

- G.C.E Advanced Level

Index No:		Year:	
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Stream:	
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No	Subject	Grade
1.		
2.		
3.		
	English	
	General Knowledge	

SECTION (C) – EMPLOYMENT DETAILS

Employed ☐ Unemployed ☐

Current Employment Details

Organization	Position

Declaration of the Candidate

I hereby declare that I have read and understood the conditions and requirements for this course of study and I hereby assure that I have the minimum qualifications and if the given details are found incorrect, my registration could be cancelled by the University at any time and have no right to reimburse any amount paid by me.

Date

Signature of Candidate

SECTION (D) – PAYMENT DETAILS

Date of Payment:

Amount in Figure: 25,000.00

Amount in Words: Twenty Five Thousand Only

Paste Original Slip Here

PEOPLE'S BANK		තැන්පතු පත வைப்புச்சீட்டு Deposit Slip		Office Copy	
විදුලි අංකය கணக்கு இலக்கம் Account Number		දිනය திகதி Date			
890012520002039					
University of Jaffna		රුපියල් ரூப Rs.		පැය පැය Cts.	
Your Name		Your Address		NIC No	
Registration Fee		Your Signature		25000.00	

සේවා අංකය: 212/2019
 වත්පසු පිටුව හෝ නිල අත්සන අත්සන වලින් වලංගුයි | இயந்திர யதிக அல்லது உத்தியோகபூர்வ அகையொப்பத்துடன் செல்லுபடியாகும் | Valid if Overprinted or Signed by an Officer
 මෙම ඉටු පතලින් පිළිවෙත් කෙටියෙන් | இக் கோட்டுக்குக் கீழே எதுவும் எழுத வேண்டாம் | Do Not Write Anything Below This Line

Checked by: 200021/2019