



CENTRE FOR OPEN AND DISTANCE LEARNING **UNIVERSITY OF JAFFNA**

APPLICATION FOR THE CERTIFICATE COURSE IN BASIC SINHALA FOR SCHOOL **LEAVERS LEVEL-I**

Please fill this application form in "BLOCK LETTERS"

SECTION	(A) – PER:	SONAL IN	FORMATIO	N

SECTION (A) - PERSONAL INFORMATION																		
1. Fu	ll Nan	ne: (Ro	ev./Mı	r./Mrs	./Miss	s.)												
2. Na	2. Name with Initial:																	
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10.D	ate of	Birth	: D1	D M	IM '	YYYY												
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SECTION (B) - EDUCATIONAL QUALIFICATIONS

EDUCATIONAL QUALIFICATIONS

• G.C.E Advance Level

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Ind	lex No:	Year:									
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No	Subject	Grade									
1.											
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	English										
	General Knowledge										
SECTION (C) – EMPLOYMENT DETAILS											
Employment Status:											
Employed Unemployed											
Current Employment Details											
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	Organization		Position								

SECTION (D) - PAYMENT

Payment Amount:

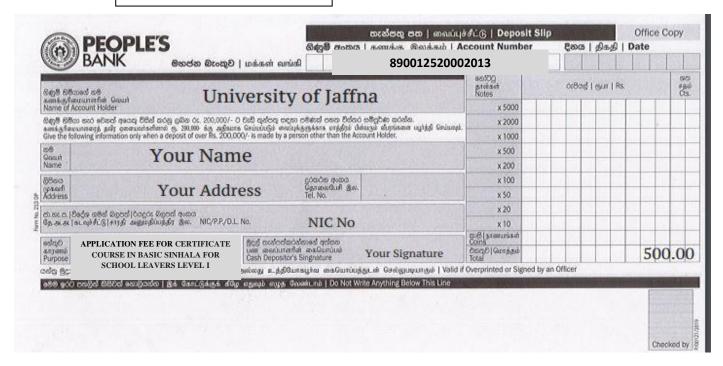
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Payment Date:

DD MM YYYY

Reference number:

890012520002013



Declaration of the Candidate

I declare hereby 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

NOTE: Applications should be sent under registered cover to the following address **on or before 04**th **June 2022.**

Deputy Registrar, Centre for Open and Distance Learning, University of Jaffna, Thirunelvely.