



REGISTRATION FOR THE HIGHER DIPLOMA IN PHYSICAL EDUCATION  
BATCH-II

Please fill this application form in "BLOCK LETTERS"  
SECTION (A) – PERSONAL INFORMATION

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

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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2. Name with Initial:

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3. Permanent Address:

.....  
.....

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 |
|----|----|------|

11. NIC No: 

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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## SECTION (B) - EDUCATIONAL QUALIFICATIONS

- G.C.E Advance Level

|           |  |
|-----------|--|
| Index No: |  |
|-----------|--|

|       |  |
|-------|--|
| Year: |  |
|-------|--|

|         |  |
|---------|--|
| Stream: |  |
|---------|--|

| No | Subject | Grade | Subject           | Grade |
|----|---------|-------|-------------------|-------|
| 1. |         |       | English           |       |
| 2. |         |       | General Knowledge |       |
| 3. |         |       |                   |       |

### Other Qualifications (If Any)

.....

.....

## SECTION (C) – EMPLOYMENT DETAILS

Employment Status:

Employed  Unemployed

Current Employment Details

| Organization | Position |
|--------------|----------|
|              |          |

❖ The relevant documents should be attached with the Application form

### 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: 146,000/= (Registration Fee)

Account Number: 780022230002966

**Paste Original Slip Here**

|  <b>PEOPLE'S BANK</b><br>මහජන බැංකුව   மக்கள் வங்கி  |  | තැන්පතු පත   வைப்புச்சீட்டு   <b>Deposit Slip</b>   |  | Office Copy                       |  |
|---|--|---|--|-----------------------------------|--|
| ගිණුම් අංකය   கணக்கு இலக்கம்   <b>Account Number</b>  |  | දිනය   திகதி   <b>Date</b>  |  |                                   |  |
| ගිණුම් හිමියාගේ නම<br>கணக்கு வைப்பாளரின் பெயர்<br><b>Name of Account Holder</b>   |  | <b>780022230002966</b>  |  |                                   |  |
| ගිණුම් හිමියා හෝ වෙනත් අයෙකු විසින් සරුකු මුදල රු. 200,000/- ට වැඩි මුදලක් තැන්පත කළහොත් එහිදී පමණක් සඳහන් කරන්න.<br>கணக்கு வைப்பாளரது தவிர ஏனையவர்களால் ரூ. 200,000 க்கு அதிகமாக வைப்புக்குள்ளாக மாற்றும் பின்மேல் விவரத்தை பூர்த்தி செய்யவும்.<br>Give the following information only when a deposit of over Rs. 200,000/- is made by a person other than the Account Holder. |  | වැටුපු<br>தாள்கள்<br><b>Notes</b>   |  | රුපුද   ரூப   <b>Rs.</b>          |  |
| වැටුපු<br>தாள்கள்<br><b>Name</b>  |  | x 5000<br>x 2000<br>x 1000<br>x 500<br>x 200<br>x 100<br>x 50<br>x 20<br>x 10                     |  | 146,000.00                        |  |
| ඔබගේ<br>முகவரி<br><b>Address</b>  |  | ඉදිරිපත් කරන<br>தளவைப்பவர்<br><b>Tel. No.</b>   |  |                                   |  |
| ඔබගේ<br>முகவரி<br><b>Address</b>  |  | නි.ප.අ.   பி.ස.අ.   பி.ස.අ.   <b>NIC No</b>   |  |                                   |  |
| වැටුපු<br>தாள்கள்<br><b>Purpose</b>   |  | ජි.පී.ටී. පැමිණිලිකරුවන්ගේ අත්සන<br>பண வைப்பாளரின் கையொப்பம்<br><b>Cash Depositor's Signature</b> |  | වැටුපු<br>தாள்கள்<br><b>Total</b> |  |
| Registration Fee for Higher Diploma<br>in Physical Education Batch-II   |  | Your Signature  |  | 146,000.00                        |  |
| සේවක විසින් පමණක් පිරවිය යුතුය   இது கணக்குக்கு கீழே எதுவும் எழுத வேண்டாம்   Valid if Overprinted or Signed by an Officer<br>Do Not Write Anything Below This Line  |  |   |  |                                   |  |