



**APPLICATION FOR THE HIGHER NATIONAL 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.)

2. Name with Initial:

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3. Permanent Address:

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4. District:

5. Province:

6. Contact No (Mobile):

(Residence):

7. E-Mail:

8. Gender

9. Civil Status

Male: Female:

Married: Unmarried:

10. Date of Birth:

11. NIC No:

SECTION (B) - EDUCATIONAL QUALIFICATIONS

- G.C.E Advance Level

Index No:

Year:

Stream:

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

SECTION (C) – EMPLOYMENT DETAILS

Employment Status:

Employed

Unemployed

Current Employment Details

Organization	Position

❖ The relevant documents should be attached with the Application form

SECTION (D) - PAYMENT

Payment Amount:

2000/= (Application Fee)

Payment Date:

DD

MM

YYYY

Reference number:

780022230002966

PEOPLE'S BANK		තැන්පතු පත வைப்புச்சீட்டு Deposit Slip		Office Copy	
විදුම් අංකය கணக்கு இலக்கம் Account Number		දිනය திகதி Date			
780022230002966					
විදුම් මාලිකාගේ නම கணக்கு வைப்பாளரின் பெயர் Name of Account Holder		University of Jaffna		රුපියල් ரூப Rs.	
විදුම් මාලිකා හෝ වෙනත් අයෙකු විසින් කරනු ලබන රු. 200,000/- 0 (වැඩි) තැන්පතු පතක මුදලක් පමණ වශයෙන් මුදල් දැමීමට අවස්ථාවක් ඇත. கணக்கு வைப்பாளரைத் தவிர வேறொருவரால் ரூ. 200,000 க்கு அதிகமான தொகையை வைப்பதற்கான ஏதாவත් நிதியை விசாரணை யூத்தி செய்யலாம். Give the following information only when a deposit of over Rs. 200,000/- is made by a person other than the Account Holder.		Notes		රුප රුපය Cts.	
නම பெயர் Name		Your Name		x 5000 x 2000 x 1000 x 500 x 200 x 100 x 50 x 20 x 10	
ලිපිනය முகவரி Address		Your Address		x 100 x 50 x 20 x 10	
ජාතික හැඳුනුම්පත් අංකය தே.அ.அ. (கடவுள் சீட்டு) அங்கி அடையாளப்பதிவு இல. NIC/P.P./D.L. No.		NIC No		x 10	
අයදුම් පිණිස APPLICATION FEE FOR HIGHER NATIONAL DIPLOMA IN PHYSICAL EDUCATION- BATCH II		විදුම් මාලිකාගේ අත්සන வைப்பாளரின் கையொப்பம் Depositor's Signature		2000.00	
වැටුප් தொகை Total		Your Signature		2000.00	
වැටුප් පිටු நிවേശකයුන්ගේ සකසා ඇති ලේඛන පිටු වලට අත්සන් කිරීමේදී වැටුප් පිටු සහතිකයක් ලෙස සලකා බැලිය යුතුය Valid if Overprinted or Signed by an Officer					
මෙහි පිටු පහතින් මට්ටමේ සකසා ඇත இக் கோட்டுக்குக் கீழே ஏதாவது எழுத வேண்டாம் Do Not Write Anything Below This Line					
Checked by: 7800222919					

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 09th February 2024.**

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