



## APPLICATION FOR THE CERTIFICATE COURSE IN SANSKRIT LANGUAGE

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)

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.....

5. District:

6. Province:

7. Contact No (Mobile):

(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

### EDUCATIONAL QUALIFICATION

- G.C.E Ordinary Level

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

**Note:- The relevant documents should be attached with the application form.**

### SECTION (C) – OTHER QUALIFICATIONS (IF ANY)

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**SECTION (D) - PAYMENT**

Payment Amount:

Payment Date: 

DD	MM	YYYY
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Account Number:

		<b>තැන්පතු පත   வைப்புச்சீட்டு   Deposit Slip</b>		Office Copy
මහජන බැංකුව   மக்கள் வங்கி		දිනය   திகதி   <b>Date</b>		
<b>890012520002971</b>		<b>Account Number</b>		
<b>University of Jaffna</b>		රුපියල්   ரூப   <b>Rs.</b>		අග ප්‍රමාණ <b>Cts.</b>
ගිණුම් හිමියාගේ නම கணக்கிதையாளரின் பெயர் Name of Account Holder		Note x 5000 x 2000 x 1000 x 500 x 200 x 100 x 50 x 20 x 10		
ගිණුම් හිමියා හෝ වෙනත් අයෙකු විසින් කරනු ලබන රු. 200,000/- ට වැඩි මුදලක් තුළින් පමණක් පවරා දීමට හැකිවීමට තරයේ. கணக்கிதையாளரைத் தவிர வேறொருவரால் ரூ. 200,000 க்கு அதிகமாக செய்யப்படும் வைப்புக்குக்கான மாதிரும் பில்லும் விபரங்களை படித்து செய்யவும். Give the following information only when a deposit of over Rs. 200,000/- is made by a person other than the Account Holder.				
නම பெயர் Name	<b>Your Name</b>			
ලිපිනය முகவரி Address	<b>Your Address</b>		දුරකථන අංකය தொலைபேசி இல. Tel. No.	
ජාතික හැඳුනුම්පත් අංකය தே.அ.அ. (அடலங்கீட்டு) எந்தி அனுமதியுடைய இல. NIC/P.P./D.L. No.	<b>NIC No</b>			
අයදුම් පත්‍රණයේ Purpose අරමුණු	APPLICATION FEE FOR DIPLOMA COURSE IN SANSKRIT LANGUAGE		මුදල් තැන්පත්කරන්නාගේ අත්සන வைப்பாளரின் கையொப்பம் Cash Depositor's Signature	මුදල් Total <b>500.00</b>
		<b>Your Signature</b>		
වලංගු වන්නේ මෙහි මුද්‍රණය වූ විට පමණක්   Valid if Overprinted or Signed by an Officer				
මෙහි මුද්‍රණය කිරීමට පෙර සියලුම තොරතුරු නිවැරදිව ලියා ඇති බවට තීරණය කර ගන්න   Do Not Write Anything Below This Line				
				Checked by: 15/03/2019

**Declaration of the Applicant**

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 Applicant