

POSTGRADUATE INSTITUTE OF HUMANITIES AND SOCIAL SCIENCES (PGIHS) UNIVERSITY OF PERADENIYA SRI LANKA

CLOSING DATE OF APPLICATIONS																											
APPLICATION NUMBER: (for official use only)																											
REGISTRATION NUMBER: (for official use only)																											
	APPLICATION FOR ADMISSION TO POSTGRADUTE DIPLOMA IN PHYSICAL EDUCATION DEGREE PROGRAMME																										
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Name of the degree with the Subject																		Medium									
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(b)	NA	ME	w	ТН	INI	TIA	LS																				
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2.7	2.7 DATE OF BIRTH																										

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(a) Currently,						(b) If employed,																				
Employed Unemployed					Place of Work																					
Unemployed					Position (Optional)																					
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(c) Co	nta	ct N	um	ber	s																				
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Name of University/ Institute									Name of the Degree/ Diploma with Subjects															_	-	~~
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	RE YOU A REGIS R ANY OTHER UN		OR ANOTHER DEGREE / DIPLOMA AT THIS	
Yes		No	If Yes, Give details:	
	NY OTHER RELE Ise additional shed		N THAT YOU WISH TO INFORM	
08. I	OCUMENTS SUB	BMITTED WITH THIS	S APPLICATION	
Cert	ified Copies of th	ne Degree/Diploma (Certificate/s	
Cert	ified Copies of th	ne Detailed Degree/	Diploma Certificate/s	
Cert	ified Copies of th	ne Birth Certificate		
Serv	ice Letter (Please	e use PGIHS/APP/FO	RM 002)	
Cert	ified Copy of the	Appointment Lette	r issued by the relevant Authority	
4 sel	f-addressed stam	aped envelopes (Rs.8	30.00) (Size – 22cm x 10cm) (Local applications only)	
09. E	ECLARATION BY	Y THE APPLICANT		
regul	ations of the PGIF		ove is correct and I agree to abide by and be subject of Peradeniya if this application is accepted for consideramme applied.	
 Date			Signature of Applicant	

10. FOR OFFICE USE ONLY			
10.1 Programme Applied for	PGDPE]	
10.2 Documents Submitted:		, —	
1 Certified Copy of Birth Ce	ertificate	6	Service Letter
2 Certified Copy of Bachelon	rs' Degree	7	Appointment Letter
3 Certified Copy of Bachelor Detailed Certificate	rs' Degree	8	Two Referee Reports
4 Certified Copy of Postgrad	luate	9	Transcript/s
5 Certified Copy of Masters Certificate/s	'Degree	10	Other Documents
Remarks, if any	<u> </u>	<u> </u>	
Remarks, if any		••••••	
Date			Signature of Subject Clerk
Remarks, if any Date			Signature of Assistant Registrar
_			Signature of Assistant Registrar
10.4 RECOMMENDATION OF I	POSTGRADUAT	E PROGRAM	IME COORDINATOR
RECOMMENDED			NOT RECOMMENDED
for admission to the programm	e applied under	Section	of admission criteria.
If not Recommended, indicate i	reasons:		
Date			Signature of Programme Coordinator
10.5 APPROVAL OF THE BOAI	RD OF STUDY		
APPROVED			NOT APPROVED
for admission to the programm	e applied.		
If not approved, indicate reason	ns:		
Date			Signature of Chairperson/ BoS
The Application is approved / N	_	no mistratia	
The Application is approved/ N If not approved, indicate reason		_	
		••••••	
Date			Signature of Director/ PGIHS