

UNIVERSITY OF RUHUNA FACULTY OF GRADUATE STUDIES

Application for Admission to the Master in Business Management (MBM) Degree Programme - 2018

Where space is insufficient, please include details on a separate sheet of paper and attach to this form.

1. PERSONAL DATA				
Name in Full:	Mr./Ms.			
(USE BLOCK				
CAPITALS)				
Name with initials	Initials:		Last Name:	
Gender				
Date of Birth	Day	Month		Year
Civil Status		•		
NIC No.				
Permanent Address				
Official Address				
Address for				
Communications				
E-mail Address				
Telephone	Home			
	Office			

2. ACADEMIC QUALIFICATIONS						
(Attach copies of certificates. Do NOT send originals)						
Institution	Period	Maj	or Field	Degree/	GPA	Year
				Diploma	/Class	
					(if any)	
3. PROFESSIONAL QUA	LIFICAT	IONS	5			
(Attach copies of certificat	es. Do NO	T ser	nd originals)		
Institution	Period	Field of Study Qualification			Year	
4. WORK EXPERIENCE	(Attach sı	uppoi	rt document	ts)		
Organization	Position 1	held	Period	Duties and Res	ponsibilities	

5. OTHER QU	ALIFICAT	TIONS	(if any)					
6. RESEARCH	I WORK (i	f any)						
List research top	pics and natu	are of t	the research	h activity	uı	ndertaken.		
7. PUBLICAT	IONS (if an	y)						
8. ACADEMIC AND/OR PROFESSIONAL HONOURS OR AWARDS (if any)								
(
9. SELF ASSE	SMENT O	F PRO	FICIENC	Y IN EN	\G	LISH (indic	ate by ''	<u> </u>
Proficiency	Very Go		God			Fair		Weak
Reading	, ery es		300	34		1 411		· · · · · ·
Writing								
Conversation								
10. FINANCE				Γ				T
Source of Finance			Private)	Sponsored	Other	Undecided	
How do you pla		al your	studies?					
If sponsored –by	y whom?							
If other (please	indicate)							

11. REASONS FOR STUDY
Briefly describe your reasons to enroll in the Masters in Business Management Degree.
I certify that the above information is true and correct. I understand that misrepresentation in
the application will cause rejection of the application or revoking acceptance for admission at
any stage.
Signature of the Applicant Date
Send this application with relevant documents under registered mail to:
Senior Assistant Registrar
Faculty of Graduate Studies
University of Ruhuna Matara
watara
Please write on the top left hand corner of the envelop "Ruhuna MBM Programme".