UNIVERSITY OF MORATUWA
FACULTY OF ENGINEERING

DEPARTMENT OF MECHANICAL ENGINEERING

Application for Master of Engineering / Postgraduate Diploma in Manufacturing Systems Engineering

1. PERSONAL INFORMATION

☐ Mr ☐ Ms	**Name in Full**: (Write in BLOCK letters and <u>Underline</u> surname/ family name)	**Date of Birth**		
		Y	**M**	**D**

Nationality: Sri Lankan / Other (Specify) ………………………..   **National Identity Card/ Passport No**.:…………………

Home Address:	**Office Address:**
Tel: **Fax:**	**Tel:** **Fax:**
Email:	**e-mail:**

Contact Address:

2. ACADEMIC QUALIFICATIONS (Please attach **copies** of relevant certificates)

A. Undergraduate Qualifications

Course Duration		Name/Address of the Institution	Degree	Class /Rank	Year of Graduation
From Month/Year	To Month/Year				

B. Postgraduate Qualifications

Course Duration		Name/Address of the Institution	Degree	Class /Rank	Year of Graduation
From Month/Year	To Month/Year				

C. List of any University scholarships, prizes or other awards received (in chronological order)

3. PROFESSIONAL QUALIFICATIONS

Membership of Professional Organizations (Please enclose documentary evidence)

From	To	Organisation	Post Held/Membership Status

4. WORK EXPERIENCE

Total number of years of work experience after graduation	
Total number of years of work experience after obtaining professional qualification	

A. Previous Occupations

From Month/Year	To Month/Year	Name & Address of Organisation	Position & Nature of Work

B. Present Occupation

From Month/Year	To Month/Year	Name & Address of Organisation	Position & Nature of Work

5. OTHER RELEVANT INFORMATION

A. Courses/Training/Seminars/Workshops Attended

B. Research undertaken and publications (Use a separate sheet if required)

6. PROGRAMME OF STUDY AND FUNDING

A. Study Programme	B. Mode of Financing
MEng ☐	Personal ☐
PG Diploma ☐	Sponsored/Scholarship ☐
	If Sponsored/Scholarship, source of fund:

C. Are you registered for any other postgraduate course? Yes ☐ No ☐

If 'Yes', give details:

7. TWO REFEREES (Name, Designation, and contact details)

(1)	(2)

8. DECLARATION

I affirm that all statements made by me on this form are correct. I understand that any inaccurate or false information (or omission of material information) will render the application invalid and that, if admitted and awarded a place on the basis of such information, my candidature can be terminated and I can also be subject to any penalty dictated by the rules of the University of Moratuwa.

Date: …………………………………

Signature: ……………………………………………………

CHECKLIST

1	Copies of certificates of academic qualifications	☐
2	Copies of certificates of professional qualifications	☐
3	Copies of certificates of work experience	☐
4	Letter of consent from the employer on leave requirement	☐
5	Letter of sponsorship (if applicable)	☐

Applications to be sent in registered post to:
Course Coordinator
MEng/ PG Diploma in Manufacturing Systems Engineering
Department of Mechanical Engineering
University of Moratuwa
Katubedda, Moratuwa 10400

<div align="center">

LETTER OF CONSENT FROM THE EMPLOYER

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PG Course Coordinator

Department of Mechanical Engineering

University of Moratuwa

Moratuwa

Reference: Mr/Ms …………………………………

Applicant for MEng/PG Diploma in Manufacturing Systems Engineering

I understand that Mr / Ms …………………………………….…………………….who is working at our organization has applied for the MEng/PG Diploma in Manufacturing Systems Engineering. If he/she is selected:

(i) Permission for the Enrolment

   I grant / do not grant permission for the applicant to follow

   (a)   MEng Course in part-time basis during a period of Two Years ☐
   (b)   PG Course in part-time basis during a period of One Year ☐

(ii) Official Leave

   I grant / do not grant official leave for the applicant to follow

   (a) MEng course as a part-time student during "Saturdays and Sundays" in the First Year and 1/2 day per week during the Second Year. ☐

   (b) PG Diploma course as a part-time student during "Saturdays and Sundays" for duration of One Year. ☐

(iii) Sponsorship

   Our organization will / will not sponsor the applicant's course fees.

Signature   : …………………………………….

Name   : …………………………………….

Designation   : …………………………………….

Organisation   : …………………………………….

Date   : …………………………………….