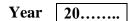
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Faculty of Graduate Studies, University of Sri Jayewardenepura

Application Form for PhD in Management Program offered by the Faculty of Management Studies and Commerce

ATA - P	ERSON	AL INFO)RMA	TION										
		First Nam	ne											
Name in Full (Use block capitals)		Last Nam	e 											
Name with i	nitial -													
Address for Communica	tion													
Permanent Address (if of from previous														
Official Add (If relevant)	ress													
Profess	ion	•			•	•	•							
E-Mail Ad	dress													
Telephone	Home Office Mobile					Marr Single			G	ende	er	M	F]
Date of Birth	Date	Month	Yea	ır		NIC Age	C No.							

PART B – EDUCATIONAL QUALIFICATIONS

1. A CADEMIC QUALIFICATION OF THE PROPERTY OF	ICATIONS OBTAINED				
University	Period	Major Field	Degree/F		

University	Period	Major Field	Degree/Diploma	Class-if any	Year

2. PROFFESSIONAL QUALIFICATIONS

Institution	Period	Field of Study/Training	Qualification	Year
1				

3. WORK EXPERIENCE

Organization	Period	Position held	Nature of Work	

4 ANY OTHER QUALIF	ICATIONS	(if any)				
5. RESEARCH WORK						
List research topics, and the nature	of the research	activity under	aken.			
_						
6. PUBLICATIONS (if any	y)					
7. ACADEMIC AND /OR	PROFESSI	IONAL AW	ARDS (if a	any)		
				-		
O PINIANICIAL ACCIONA	ICE					
8. FINANCIAL ASSISTA		1		1	T	
	Private	Sponsored	Grant	Fellowship	Studentship	University
						Teacher
How do you plan to finance your						
Postgraduate Studies?						
If sponsored – by whom?						
If Grant, give Grant name, total						
amount & Grant number.						

9. PREFERRED FIELD OF SPECIALIZATION

Please write on the ton corner of the envelope "PhD in Management"

Provide evidence to prove your eligibility for the specialization field as attached documents					
General/Business Management	Finance				
Estate management and Valuation	Human Resource Management				
Public Management	Information Systems				
Accounting	Marketing				
Business Economics	Operations Management				
Entrepreneurship	Commerce (insurance, transport, trade etc.)				

I certify that the above information is true and correct. I understand that misrepresentation in application will cause the rejection of application or revoking acceptance for admission at any stage.	
DateSignature of Applicant	
Mail this application with relevant documents including Paying-in -voucher for Rs.2500 under registered cover to	
DEPUTY REGISTRAR, FACULTY OF GRADUATE STUDIES UNIVERSITY OF SRI JAYEWARDENEPURA, GANGODAWILA, NUGEGODA, SRI LANKA.	
Tolonhono No. 104 115522642 Empile donutruogiantum fag@ampil.com	



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