	Name of Candidate	:
	NIC No. of Candidate	›:
	Address	:
	Date	:
Registrar,		
University of		
Dear Sir/Madam,		
Transcript of	of Academic Recor	ds – 2019 January
	Postgraduate Institute	of Agriculture, University of Peradeniya to
Postgraduate Institute of Agricult	ture, P.O. Box 55, Old	academic record to the Deputy Registrar I Galaha Road, Peradeniya, Sri Lanka to tter when my transcript is forwarded to the
My particulars are as follows,		
My particulars are as follows, 1. Name in full	:	
• •		
1. Name in full	:	
 Name in full Name of Degree 	: :	
 Name in full Name of Degree Date of Admission 	: :	
 Name in full Name of Degree Date of Admission Date of Final Examination 	: :	

(Signature of Applicant)