Ref. No.	
(for office use only)	

POSTGRADUATE INSTITUTE OF AGRICULTURE

UNIVERSITY OF PERADENIYA

APPLICATION FOR ADMISSIONS

Academic year – 2024/25 (Peradeniya Intake)

Please affix
4cm x 3cm
color
Photograph
(Background

(Background should be sky blue)

IMPORTANT:

- Only certified photocopies of certificates in support of age (Birth Certificate) and educational / professional
 qualifications (Convocation degree certificate, detailed certificate or course completion certificate) together with the
 payment receipt of the application processing fee (LKR 3,000.00 should be sent to the Deputy Registrar, Postgraduate
 Institute of Agriculture, P.O. Box 55, Old Galaha Road, Peradeniya. by registered post.
- Students applying for M.Phil. / Ph.D. should submit two page concept notes together with the application. The applicant need to mentioned that the funding source for research.
- Official Transcript of the candidate should be submitted directly to the PGIA by the respective University where the applicant has obtained Bachelor Degree or equivalent qualifications.
- Students whose final results are pending (results to be released by October 2024) can apply with an official document issued by the Registrar of University / Institute.
- Employees of government department, corporations (permanent employees only) should submit their applications through the respective head of the institute/ corporation. (Send the Employer Consent Form separately)
- If you are unable to submit all relevant documents by deadline, kindly submit the application and payment receipt together with the available documents and remaining documents to be submitted within two weeks' time.

1. National ID No:															
1. National ID No.															
Rev. / Mr. / Miss. / Mrs. /	Dr.														
Name with initials:															
Name in Full:															
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2. Home address: Telephone:	te that this	is how	your	name v	vill app	ear in	your	postg	radua	ate de	gree (certi	ficate	e.)	
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3. Present employmen	t (Name of desi	gnation):				
4. Name and address of	of employer:					
5. Employment record	l (List your mos	st recent position fi	irst):			
Name and address	of Po	Position / Rank		riod To	N	ature of duty
employer			From	10		
6. Educational/ profe	ssional qualific	cations (Copies of	certificate/s should	be attached):		
University / Institute	From	То	Degree		Field	Class / Pass
7. List of publicatio	ns (attach a se	eparate sheet if th	ne space given her	e is inadequa	ate):	

8. Proposed programme of study:

Please refer to section 2, 4 and 5 of the student hand book and prospectus before completing this section.

Board of Study	Name of the Degree Program Offered	Tick off (✓) only ONE (01) program
	Master of Plant Biology Conservation and Breeding	
Agricultural Biology	Master of Biotechnology	
Agricultural Biology	M.Phil	
	Ph. D.	
	Master of Agricultural Economics	
	Master of Environmental Economics	
Agricultural Economics	Master of Natural Resource Management	
igneditural Economics	M.Phil	
	Ph. D.	
	Master of Agricultural and Bio-Systems Engineering	
	Master of Geo-Informatics	
Agricultural Engineering	Master of Integrated Water Resources Management	
agriculturar Engineering	M.Phil	
	Ph. D.	
	Master of Development Communication & Extension	
	Master of Organizational Management	
Agricultural Extension	M.Phil	
agricultural Extension	Ph.D.	
	Master of Animal Science	
	Master of Aquatic Bio-Resources Mgt. & Aquaculture	
Animal Science	Master of Dairy & Meat Product Technology	
immai Science	Master of Poultry Science & Technology	
	M.Phil	
	Ph. D.	

	Master of Applied Statistics
	Master of Bio-Statistics
Bio-Statistics	PG Diploma in Applied Statistics
Dio Statistics	M.Phil
	Ph. D.
	Master of Business Administration (CW)
Business Administration	Master of Business Administration (CW & R)
	DBA
	Ph. D.
	Master of Crop Science
	Master of Environmental Forestry
	Master of Floriculture and Landscape Architecture
	Master of Tropical Agriculture
G G.:	Master of Plantation Crop Management
Crop Science	Master of Horticulture
	M.Phil.
	Ph. D.
	Master of Food & Nutrition
F 1 C 9 T	Master of Food Science & Technology
Food Science & Technology	M.Phil.
	Ph. D.
	Master of Molecular and Applied Microbiology
Dland Ductootics	Master of Plant Protection Technology
Plant Protection	M.Phil
	Ph. D.
	Master of Environmental Soil Science
	Master of Topical Soil Management
Soil Science	Master of Soil & Environmental Microbiology
20-20-00-00-00-00-00-00-00-00-00-00-00-0	M. Phil
	Ph. D.
	Master of Agroecology
Multi Deciplinery Program	M. Phil
- • •	Ph. D.
Note: CW- Course Wo	rk CW & R – Course Work & Research.

	ive names and addresses of two referees, at turer at the university)	t least one o	of whom should have been your					
Name		Name						
Address		Address						
Email		Email						
Contact	No	Contact	No					
should be r of Agricult	eferee reports annexed hereto should be har equested to send their reports duly perfected ure under confidential cover. However, if the s should be hand delivered or posted to the	l, directly to se sealed en	o the Director, Postgraduate Institute					
best of my university program o	I do hereby declare that particulars provided by me in this application are true and accurate to the best of my knowledge, and that I am not registered for any postgraduate degree program in any university in Sri Lanka at the time of this application. In the event of my being selected for the program of study I have applied for; I hereby agree to abide by such regulations of the institute as applicable to me.							
Date:		S	Signature of applicant					

Employer Consent Form

Name of the Applicant											
NIC NO:											
NOTE: To be completed by the Head of the Insif applicable.	titute	e/ Co	rpora	ation	/ En	terpi	rise o	f the	appl	icant	t
Director Postgraduate Institute of Agriculture University of Peradeniya P.O.Box 55, Old Galaha Road Peradeniya											
Forwarded. If selected, the applicant will be given the PGIA.	perm	issioı	ı to fo	ollow	a po	stgra	duate	e deg	ree p	rogra	m at
Address:											
				Sign	ature	e of I	Head	of the	e Inst	itute/	′
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Date:											
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POSTGRADUATE INSTITUTE OF AGRICULURE UNIVERSITY OF PERADENIYA <u>REFEREE'S REPORT - 2024/25</u>

SECTION 'A' (To be completed by the Candidate)

REFERE	<u>E(Undergradi</u>	<u>iate Lecturer o</u>	r Supervis	<u>APPLICANT</u>	
Name				Full Name	
Title					
Institution				NIC No. of Candidate:	
Mailing Addre	SS			Board of Study	
				(Must be the same as that shown on applica	ntion)
Proposed I	Postgraduate Pr	<u>rogram</u> (Circle o	one)		
M.Sc.	MBA	M. Phil.	Ph. D.	DBA	
I,		hereby	waive my r	ight of access to this reference report.	
				(Signature	e of applicant)
	(This	form should be s	signed by ap	pplicant before sending to the referee).	

SECTION 'B' (To be completed by the Referee)

Please evaluate the applicant by placing a tick ($\sqrt{}$) after each characteristic that most nearly represents your opinion. Compare the applicant with a representative group of students qualified for graduate study whom you have known and who have had approximately the same amount of experience and training as the applicant. If you lack knowledge to make a definite rating, give your estimate of applicant's ability, by checking the last column.

	Below Average	Average	Good	Superior (Top 10%)	Inadequate Opportunity to Observe
a. Ability to master academic work					
b. Ability in oral expression in English					
c. Ability to written expression in English					
d. Motivation					
e. Emotional stability and maturity					
f. Self-reliance and independence					

a.		This student was enrolled in my class/es.							
b.		I was this student's undergraduate advisor/ project or research advisor.							
c.		While I have not taught or advised the applicant, I have known the person for years.							
d.		I supervised or directed the work of the applicant for years.							
e.		I do not know this individual well enough to evaluate.							
	•	please add any comments which will assist in applicant should be admitted to the PGIA.							
	Signature of Referee with official frank								
	Date:								

Please enclose the confidential report in the envelope provided and sign after sealing it. **The signed envelope could be handed over to the applicant** who is required to mail it along with his/her application or may mail your recommendation directly to the address given below to reach the Institute on or before 07-10-2024

Director
Postgraduate Institute of Agriculture
P.O. Box 55
Old Galaha Road
Peradeniya

POSTGRADUATE INSTITUTE OF AGRICULURE UNIVERSITY OF PERADENIYA REFEREE'S REPORT – 2024/25

SECTION 'A' (To be completed by the Candidate)

REFERE	EE(Undergradu	<u>iate Lecturer o</u>	r Supervis	<u>APPLICANT</u>	
Name				Full Name	
Title					
Institution				NIC No. of Candidate:	•••••
Mailing Adda	ress			Board of Study	
				(Must be the same as that shown on application	1)
Proposed	Postgraduate Pi	ogram (Circle o	ne)		
M.Sc.	MBA	M. Phil.	Ph. D.	DBA	
I,		hereby	waive my r	ight of access to this reference report.	
	(This	form should be s	signed by an	(Signature of <i>oplicant before sending to the referee</i>).	applicant)
	(11113)	joini siiouu oe s	ngnou by up	procure octors seriaing to the referee).	

SECTION 'B' (To be completed by the Referee)

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ь. Ability in oral expression in English					
c. Ability to written expression in English					
d. Motivation					
e. Emotional stability and maturity					
f. Self-reliance and independence					

a.		This student was enrolled in my class/es.				
b.		I was this student's undergraduate advisor/ project or research advisor.				
c.		While I have not taught or advised the applicant, I have known the person for years.				
d.		I supervised or directed the work of the applicant for years.				
e.		I do not know this individual well enough to evaluate.				
In the space below or by attachment, please add any comments which will assist in making a judgment as to whether the applicant should be admitted to the PGIA.						
	Signature of Referee with official frank					
	Date:					

Please enclose the confidential report in the envelope provided and sign after sealing it. **The signed envelope could be handed over to the applicant** who is required to mail it along with his/her application or may mail your recommendation directly to the address given below to reach the Institute on or before 07-10-2024

Director
Postgraduate Institute of Agriculture
P.O. Box 55
Old Galaha Road
Peradeniya

This application along with the nother University/Institute where the qualifications.		·			
	Name of Candidate	:			
	NIC No. of Candidate :				
	Address	:			
	Date	:			
Registrar,					
University of					
Dear Sir/Madam,					
Transc	ript of Academic R	<u> Records – 2024/25</u>			
I have applied for admission to the pursue a program of study during the	C	of Agriculture, University of Peradeniya to			
Postgraduate Institute of Agricul	ture, P.O. Box 55, Old	academic record to the Deputy Registrar , Galaha Road , Peradeniya , Sri Lanka . To tter when my transcript is forwarded to the			
My particulars are as follows,					
1. Name in full	:				
2. Name of Degree	:				
3. Date of Admission	:				
4. Date of Final Examination	:				
A receipt in support of payment for	this transcript is enclos	ed.			
		Yours faithfully,			

(Signature of Applicant)