

**UNIVERSITY OF PERADENIYA
PERADENIYA**

**APPLICATION FORM FOR
POSTGRADUATE RESEARCH FELLOWSHIPS – 2020**

(Please print or type in block capitals)

01. Fellowship/s applied for: (1)
(2)
(3)

02. Name of applicant in full:

03. Address: (Residence).....

(Official).....

Telephone : Residence: Official:

04. Date of Birth:

05. National Identity Card No.:

06. Particulars of Employment:

6.1 Designation:

6.2 Place of work:

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6.3 Recommendation of the Head of the Institute, where the applicant is employed.

Full time leave can be granted throughout the research project.

(Yes/No) (give reasons if not recommended)

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Date

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Signature of Head of Institute/
Department

07. Particulars of Academic Qualifications :

(Please attach certified copies of the Degree Certificates)

** Please arrange to have transcript/s sent to the Assistant Registrar / Council & Academic Division,
University of Peradeniya*

University	Degree/Diploma	Year	Faculty	Subject/s	Class	GPA
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08. Other Qualifications: *(Please attach additional papers if necessary)*

N.B. You must attach copies of supporting documents.

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09. Academic distinctions (prizes, medals, scholarships, etc.): *(Attach additional papers if necessary)*

N.B. You must attach copies of supporting documents

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10. Publications: *(Attach additional papers if necessary)*

N.B. You must attach copies of supporting documents.

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11. Extracurricular activities: *(Attach additional papers if necessary)*

N.B. You must attach copies of supporting documents.

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12. Previous work experience (if any):

N.B. You must attach copies of supporting documents.

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13. Particulars of the Postgraduate Program:

Ph.D.	M.Phil

a. Proposed Program of Study :

b. Faculty

c. Department/Board of Study

d. Title and brief statement of proposed study: (Please attach an abstract of 500 words)

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e. If you are already registered for a postgraduate program of this University, please give the following particulars.

- i. Program of Study:
- ii. Year of Registration:.....
- iii. Registration No.

I do hereby certify that the particulars furnished by me in this application are true and correct.
In the event of my application for the fellowship is accepted, I shall abide by the rules and regulations governing the fellowship.

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Date

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Signature of Applicant

14. Recommendations:

14.1 Supervisor : Please give a brief statement on the suitability of the applicant and the importance of the proposed study.

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Name and details of Department/Faculty/Division to which the Supervisor is attached:

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Date

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Signature

14.2 Recommendation of the Head of the Department/Chairman of the Board of Study

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Date

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Signature

14.3 Recommendation of the Dean of the Faculty/Director of the PG Institute

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Date

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Signature

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Date of receipt of the Application by Council & Academic Division

(Date stamp here)