

Student Request Form
Postgraduate Institute of Agriculture
University of Peradeniya

To: Director / Deputy Registrar, PGIA

Name	Rev./Mr./Ms./Mrs./Dr.
Reg. No	
Board of Study	
Degree Programme	
Contact No.	
Email Address	
Request Change of Board of Study <input type="checkbox"/> Change of Degree Programme <input type="checkbox"/> Downgrade the Programme <input type="checkbox"/> Upgrade the Programme <input type="checkbox"/> Makeup Exam <input type="checkbox"/> Exemption of Courses <input type="checkbox"/> Leave of Absence <input type="checkbox"/> Deferment <input type="checkbox"/> Other <input type="checkbox"/> <i>If other, please specify</i>	
Reason for the above request – <i>Clearly explain the reason for the request</i>	
Signature of the Student	
Date	
Date received by the Deputy Registrar/PGIA	