

DEPARTMENT OF INSURANCE & VALUATION

FACULTY OF BUSINESS STUDIES & FINANCE WAYAMBA UNIVERSITY OF SRI LANKA KULIYAPITIYA

Application for Admission to the Higher Diploma in Risk Management & Insurance (Intake -6)

1.	Name in Full (USE BLOCK	LETTERS)): Mr./Mrs./	/Miss		•••••		
2.	Name with Initials:			•••••		• • • • • • • •		
3.	Residential Address:			Officia	al Add	ress:		
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4.	National Identity Card Numb	er:						
5.	Date of Birth: DD/MM/Y							
6.	Marital Status:		Single		Ma	rried [
7.	Educational Qualifications (A	Attach photo	ocopies of o	certifica	ites)			
	Qualification		School	l/Institu	ıte		Index No	Year

Institution	Period of S	tudy Qua	lification	Completed Month &Year
. Work Experience				
Orga	nization	Period of Se	rvice	Position Held
0. Competency in English Excellent	Good	Average		
1. How do you pay your o	course fees?			
Private Funds	Sponsored	1		
Tilvate Tanas	Sponsored	_		
2. If sponsored, by whom	9			
2. If sponsored, by whom			• • • • • • • • • • • • • • • • • • • •	
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I certify that the above application will cause restricted that the incomplete application. Signature of the Application. Administrative Coord. Diploma in Risk Man. Department of Insurar Faculty of Business S. Wayamba University	to: inator, agement & Insurance, nce & Valuation, tudies & Finance,	Application fee below mentione	nderstand that acceptance for Rs. 1000/- shed bank acceptance (BoC).	at misrepresentation is admission. I am awar Date ould be deposited to the
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I certify that the above application will cause resthat the incomplete application. Signature of the Application. Administrative Coord. Diploma in Risk Man. Department of Insurar Faculty of Business S. Wayamba University. Kuliyapitiya. or. Duly completed application application.	to: inator, agement & Insurance, nce & Valuation, tudies & Finance, of Sri Lanka,	Application feed below mentioned Bank of Ceylon Account Name Account No Bank	Rs. 1000/- shed bank acce (BoC). Wayamba L 0410080123	Date University of Sri Lanka