



DEPARTMENT OF INSURANCE & VALUATION
FACULTY OF BUSINESS STUDIES & FINANCE
WAYAMBA UNIVERSITY OF SRI LANKA
KULIYAPITIYA

Application for Admission to the Diploma in Risk Management & Insurance
(Intake – 13)

1. Name in Full (USE BLOCK LETTERS): Mr./Mrs./Miss.....
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2. Name with Initials:

3. Residential Address:	Official Address:
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Tel:	Tel:
Email:	Email:

4. National Identity Card Number:

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5. Date of Birth: DD/MM/Y

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6. Marital Status: Single ☐ Married ☐

7. Educational Qualifications (Attach photocopies of certificates)

Qualification	School/Institute	Index No	Year

8. Professional Qualifications (Attach photocopies of certificates)

Institution	Period of Study	Qualification	Completed Month & Year

9. Work Experience

Organization	Period of Service	Position Held

10. Competency in English

Excellent ☐ Good ☐ Average ☐

11. How do you pay your course fees?

Private Funds ☐ Sponsored ☐

12. If sponsored, by whom?

I certify that the above information is true and correct. I understand that misrepresentation in application will cause rejection of the application or revoking of acceptance for admission. I am aware that the incomplete applications will be rejected.

.....
Signature of the Applicant

.....
Date

Mail this application to:

Administrative Coordinator,
Diploma in Risk Management & Insurance,
Department of Insurance & Valuation,
Faculty of Business Studies & Finance,
Wayamba University of Sri Lanka,
Kuliapitiya.

or

Duly completed application forms can be submitted through online to the email to drmi@wyb.ac.lk

Contact: 071-7854856 / 077- 4106581