



POSTGRADUATE INSTITUTE OF
HUMANITIES AND SOCIAL SCIENCES (PGIHS)
UNIVERSITY OF PERADENIYA
SRI LANKA

CLOSING DATE OF APPLICATIONS

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APPLICATION NUMBER:
(for official use only)

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REGISTRATION NUMBER:
(for official use only)

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APPLICATION FOR ADMISSION TO POSTGRADUTE DIPLOMA/
MASTER DEGREE PROGRAMMES

01. PROGRAMME APPLIED:

Name of the degree with the Subjects	Medium

Example: MA in Economics, PG Diploma in Pali

02. PERSONAL DATA

(Please use capital letters in completing sections 1.a and 1.b)

2.1 NAME OF THE CANDIDATE

(a) FULL NAME (Rev. / Mr. / Mrs./Ms.) (Please leave one space after each name)																									

(b) NAME WITH INITIALS																									

2.2 SEX

Male	
Female	

2.3 NATIONALITY

Sri Lankan	
Foreign National	
If foreign, specify the Country of Residence	

2.4. POSTAL ADDRESS

2.5 NATIONAL ID NO

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2.6 PASSPORT NO. (Foreign Nationals only)

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2.7 DATE OF BIRTH

D	D	M	M	Y	Y	Y	Y
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2.8. EMPLOYMENT DETAILS

(a) Currently,

Employed	
Unemployed	

(b) If employed,

Place of Work	
Position (Optional)	

03. CONTACT DETAILS

3.1 TELEPHONE NUMBERS

[illegible]

WhatsApp

3.2 E - MAIL

[illegible]

3.3 CONTACT PERSON FOR EMERGENCIES

(a) Name	
(b) Relationship	<i>Father/ Mother/ Spouse/ Children/</i>
(c) Contact Numbers	

04. HIGHER EDUCATIONAL AND RESEARCH QUALIFICATIONS

4.1 EDUCATIONAL QUALIFICATIONS

Name of University/ Institute	Name of the Degree/ Diploma with Subjects	Year	Grade/ GPA/ Class

4.2 IF YOU HAVE COMPLETED A THESIS AT MASTERS' LEVEL, INDICATE THE FOLLOWINGS

(a) Title of Thesis	
(b) Date of Completion	
(c) University/ Institute	

05. RESEARCH PUBLICATION (If any) (Please indicate top 5 publications)

(Use additional sheets if necessary)

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06. ARE YOU A REGISTERED STUDENT FOR ANOTHER DEGREE / DIPLOMA AT THIS OR ANY OTHER UNIVERSITY?

Yes ☐ No ☐ If Yes, Give details:

.....
.....

07. ANY OTHER RELEVANT INFORMATION THAT YOU WISH TO INFORM
(Use additional sheets if necessary)

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08. DOCUMENTS SUBMITTED WITH THIS APPLICATION

- Certified Copies of the Degree/Diploma Certificate/s** ☐
(Applicants who possess a foreign degree are required to submit a letter of recognition of their foreign qualification, duly issued by the University Grants Commission (UGC) of Sri Lanka)
- Certified Copies of the Detailed Degree/Diploma Certificate/s** ☐
- Certified Copies of the Birth Certificate** ☐
- Service Letter** (When requested) ☐
- 4 self-addressed stamped envelopes** (Rs.110.00) (Size – 22cm x 10cm) (Local applications only) ☐

09. DECLARATION BY THE APPLICANT

I certify that the information provided above is correct and I agree to abide by and be subject to the regulations of the PGIHS and the University of Peradeniya if this application is accepted for consideration to the admission to the diploma/degree programme applied.

.....
Date

.....
Signature of Applicant

10. FOR OFFICE USE ONLY

10.1 Programme Applied for

PG DIP	
MA	
Other	

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.....

10.2 Documents Submitted:

1	Certified Copy of Birth Certificate	
2	Certified Copy of Bachelors' Degree	
3	Certified Copy of Bachelors' Degree Detailed Certificate	
4	Certified Copy of Postgraduate Diploma	
5	Certified Copy of Masters' Degree Certificate/s	

6	Service Letter	
7	Synopsis of Research Project	
8	Two Referee Reports	
9	Transcript/s	
10	Other Documents	

Remarks, if any

.....
Date

.....
Signature of Subject Clerk

10.3 RECOMMENDATION OF ASSISTANT REGISTRAR

The application is complete and submitted to Programme Coordinator and Board of Study for selection.

Remarks, if any

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Date

.....
Signature of Assistant Registrar

10.4 RECOMMENDATION OF POSTGRADUATE PROGRAMME COORDINATOR

RECOMMENDED

☐

NOT RECOMMENDED

☐

for admission to the programme applied under Section of admission criteria.

If not Recommended, indicate reasons:

.....
Date

.....
Signature of Programme Coordinator

10.5 APPROVAL OF THE BOARD OF STUDY

APPROVED

☐

NOT APPROVED

☐

for admission to the program me applied.

If not approved, indicate reasons:

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Date

.....
Signature of Chairperson/ BoS

10.6 APPROVAL OF DIRECTOR/ PGIHS

The Application is approved/ Not approved for registration.

If not approved, indicate reasons:

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Date

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Signature of Director/ PGIHS