

SABARAGAMUWA UNIVERSITY OF SRI LANKA
SUPPLICATION FOR THE CONFERMENT OF DEGREE

(Please give the details accurately and neatly)

01. a) Name with initials -
b) Names indicated by initials -
.....
c) Sex -
02. Address for correspondence -
.....
.....
03. Telephone No. -
04. Name of the degree to be conferred -
05. Your Student Registration No - Index No -
06. Month and Year of the Degree Examination -

(Mark the relevant cage)

1 st Class	2 nd Upper	2 nd Lower	Ordinary Pass

07. a) Whether you attend the convocation -
b) If you attend the Convocation please give the Names and the National Identity Cards No. of two visitors you are intending to accompany -

	Name	National Identity Card No
1.
2.

(Only two guests will be allowed inside the Main Hall.)

08. Amount of fees paid as per details given in the letter – Rs.

I do solemnly declare that I shall faithfully observe the statutes, by - laws and regulations and rules of the Sabaragamuwa University of Sri Lanka in so far as they may apply to me and that I shall not make use of the privileges to be presently conferred on me in any manners so as bring the University into disrepute.

Date

.....

Signature

For office use only

Amount of fees paid -

In person / In absentia -

Date

Deputy Registrar