

**SABARAGAMUWA UNIVERSITY OF SRI LANKA**  
**FACULTY OF APPLIED SCIENCES**  
**BSc. (HONOURS) IN ENVIRONMENTAL SCIENCES AND NATURAL**  
**RESOURCE MANAGEMENT**  
**YEAR III SEMESTER II EXAMINATION**  
**(2020/2021 Batch) Proper**  
**(August/September - 2025)**

**EXAMINATION APPLICATION FORM**

01. Registration No : ..... Index No : ..... Medium : .....
02. Full Name (In English Block Letters) : .....  
.....
03. Please state the subject/subjects that you expect to offer for the Examination.

<b>COURSE CODE</b>	<b>COURSE TITLE</b>	<b>SIGNATURE OF LECTURER INCHARGE CONFIRMING THAT THE CANDIDATE HAS FOLLOWED THE COURSE SATISFACTORILY AND IS ELIGIBLE TO SIT THE EXAMINATION.</b>
ESNRM 32201	Resource Efficient and Cleaner Production	
ESNRM 32202	Aquatic Resource Management (Theory and Practical)	
ESNRM 32203	Coastal and Marine Resource Management (Theory and Practical)	
ESNRM 32204	Tools for Environmental Management	
ESNRM 32205	Study and Management of Natural Hazards	
ESNRM 32206	Biodiversity Conservation and Management (Theory and Practical)	
ESNRM 32207	Soil Degradation and Management	
ESNRM 32108	Community Outreach Program (Mini Project)	
<b>Optional Subjects</b>		
ESNRM 32210		
ESNRM 32211		
ESNRM 32212		
ESNRM 32213		
ESNRM 32214		

04. State whether Mr. / Ms.: .....

05. Permanent Address: .....

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.....  
.....

06. Address during the period of Examination :

.....  
.....  
.....

07. Contact Number : .....

08. Date of admission to the University : .....

09. Have you been registered for this year : .....

Give date of payment of registration fees for the course : .....

10. Have you postponed sitting this examination earlier due to illness (supported by Medical Certificate) or any other reasons? If so give particulars.

11. Amount of fees paid. (for the first time need not pay examination fees).

Amount: .....

Date of payment & receipt No. : .....

I certify that the above information is correct. I am aware that my application shall be rejected, if any of the information given above is incorrect.

Date: .....

.....  
Signature of Candidate.

- Delete as appropriate