

**SABARAGAMUWA UNIVERSITY OF SRI LANKA**  
**FACULTY OF GEOMATICS**

**CALLING APPLICATIONS FOR THE YEAR IV SEMESTER II (2019/2020)**  
**EXAMINATION – FEBRUARY 2026**

**Year IV Semester II (2019/2020) Examination** of the **Faculty of Geomatics** has been scheduled to be held in **February 2026**. Accordingly, the Students of the Faculty who are required to sit for the relevant examinations are advised to submit their applications as per instructions given below.

**01. ISSUING APPLICATION FORMS**

Applications should be submitted on the prescribed forms obtainable from the **University Website (<https://www.sab.ac.lk/>).**

**02. SUBMISSION OF COMPLETED APPLICATION FORMS**

Students of the Faculty should handover their duly filled application forms to the **Examination Branch** on **06<sup>th</sup> February, 2026** between **9.00 a.m. to 12.00 noon** and from **1.30 pm to 3.30 pm**.

*N. B. - Students' Record Books should be produced when applications are handed over. Only the students who have valid registration for the relevant academic year are eligible to apply for the examination.*

**03. FILLING IN THE APPLICATION FORMS**

It is the responsibility of the candidates to enter all subjects (Title of Question Papers with Code Numbers) clearly in the application form. Heads of Departments may be consulted with regard to any clarification in completing the application forms.

**04. APPLICATIONS FROM STUDENTS WHO HAVE FAILED OR HAVE NOT COMPLETED THEIR PREVIOUS EXAMINATIONS**

Those students who fall into the above category are required to pay the appropriate examination fees along with their applications. The fees can be paid at any branch of the Bank of Ceylon to the credit of the Sabaragamuwa University, Account Number **0002246976** at Bank of Ceylon, Balangoda Branch, or direct to the Shroff of the University. Receipts for payment of fees should be attached to the applications.

**FEE PAYABLE BY CANDIDATES REPEATING THE SEMESTER EXAMINATION**

**I. Repeat Examination Fees (for a Semester)**

One Subject	-	Rs. 25.00
Two Subjects	-	Rs. 50.00
Three Subjects	-	Rs. 75.00
Four Subjects or more	-	Rs. 100.00

**05. WITHHOLDING OF EXAMINATION RESULTS**

Results of those students who have not paid hostel fees, charges for damages done to the University property and of those who have not returned sports equipment and library books etc. will be withheld. Students are therefore advised to get clearance for the above payments before applications are submitted for any examination.

Senior Assistant Registrar / Examinations  
28.01.2026

CC: 01. Dean/Faculty of Geomatics  
02. Librarian  
03. All Heads of Departments /Faculty of Geomatics  
04. Senior Assistant Registrar/Academic & Students' Services  
05. Assistant Registrar/Faculty of Geomatics - Please make necessary  
arrangements to issue the applications.

**SABARAGAMUWA UNIVERSITY OF SRI LANKA**  
**FACULTY OF GEOMATICS**  
**BSc. HONOURS IN SURVEYING SCIENCES**

**YEAR IV SEMESTER II EXAMINATION (February - 2026)**

**EXAMINATION APPLICATION FORM**

01. Registration No : ..... Index No : .....

02. i. Full Name (In English Block Letters) : .....

.....  
(To be written in degree certificate)

ii. සම්පූර්ණ නම (සිංහලෙන්) : .....

.....  
(දුපාධි සහතිකයට ඇතුළත් තිරිම සඳහා)

03. Please state the subject/subjects that you expect to apply for the Examination.

**SUBJECT****SUBJECT CODE**

SIGNATURE OF LECTURER  
INCHARGE CONFIRMING THAT  
THE CANDIDATE HAS  
FOLLOWED THE COURSE  
SATISFACTORILY AND IS  
ELIGIBLE TO SIT THE  
EXAMINATION.

i. Industrial Training IT 42798 .....

**SEAL OF THE FACULTY / DEPARTMENT**

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

05. Permanent Address: .....

.....  
.....

06. Address during the period of Examination :

.....  
.....

07. Contact Number : .....

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

09. Have you been registered for this academic 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.

**SABARAGAMUWA UNIVERSITY OF SRI LANKA**  
**FACULTY OF GEOMATICS**  
**BSc. HONOURS IN SURVEYING SCIENCES**

**YEAR IV SEMESTER II EXAMINATION (February - 2026)**

**REPEAT/MEDICAL EXAMINATION APPLICATION FORM**

01. Registration No : ..... Index No : .....

02. i. Full Name (In English Block Letters) : .....

.....  
(To be written in degree certificate)

ii. සම්පූර්ණ නම (සිංහලෙන්) : .....

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(රුපාවි සහතිකයට ඇතුළත කිරීම සඳහා)

03. Please state the subject/subjects that you expect to apply for the Examination.

SUBJECT	SUBJECT CODE	ATTEMPT	SIGNATURE OF LECTURER INCHARGE CONFIRMING THAT THE CANDIDATE HAS FOLLOWED THE COURSE SATISFACTORILY AND IS ELIGIBLE TO SIT THE EXAMINATION.
i. Industrial Training	IT 42798	<input type="checkbox"/>	.....

**SEAL OF THE FACULTY / DEPARTMENT**

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

05. Permanent Address: .....

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

06. Address during the period of Examination :

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

07. Contact Number : .....

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

09. Have you been registered for this academic 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.