SABARAGAMUWA UNIVERSITY OF SRI LANKA
FACULTY OF GEOMATICS
CALLING (REPEAT/MEDICAL) APPLICATIONS FOR THE YEAR II SEMESTER I - FC 21546 LAND SURVEYING PRACTICAL III EXAMINATION – November 2026

Year II Semester I - **FC 21546 Land Surveying Practical III**, Examination of the Faculty of Geomatics has been scheduled to be held in **November 2026**. Accordingly, **Repeat/Medical students** of the Faculty who have not yet submitted their applications and are required to sit for the relevant examinations are advised to submit their applications as per instructions given below. **(Students who have already submitted their applications are requested to refrain from resubmitting.)**

01. ISSUING APPLICATION FORMS

Applications should be submitted on prescribed forms obtainable from the **Dean's Office of the Faculty**. Forms will be issued on **12th November 2026** between **9.00 a.m. to 12.00 noon** and from **1.30 pm to 3.30 pm**.

02. SUBMISSION OF COMPLETED APPLICATION FORMS

Students of the Faculty should handover their duly filled application forms to the **Examination Branch** on **17th November 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
10.11.2026

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.

Repeat/Medical

FOR OFFICE USE ONLY

Index No.: .....

SABARAGAMUWA UNIVERSITY OF SRI LANKA
FACULTY OF GEOMATICS
BACHELOR OF SCIENCE HONOURS IN SURVEYING SCIENCES

YEAR II SEMESTER I EXAMINATION
(November 2026)

EXAMINATION APPLICATION FORM (Repeat/Medical)

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

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

.....

ii. Name denoted by Initials :.....

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

	SUBJECTS	SUBJECT CODE	ATTEMPT	SIGNATURE OF LECTURER INCHARGE CONFIRMING THAT THE CANDIDATE HAS FOLLOWED THE COURSE SATISFACTORILY AND IS ELIGIBLE TO SIT THE EXAMINATION.
i.	**Land Surveying Practical III**	**FC 21546**		.....

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 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.