

SABARAGAMUWA UNIVERSITY OF SRI LANKA
FACULTY OF GEOMATICS
CALLING APPLICATIONS FOR THE YEAR II SEMESTER I (2019/2020)
PROPER EXAMINATION – AUGUST/SEPTEMBER 2023

Year II Semester I (2019/2020) Proper Examination of the **Faculty of Geomatics** the scheduled to be held in **August/September 2023**. 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 prescribed forms obtainable from the **Dean's office of the Faculty**. Forms will be issued on **16th August, 2023** 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 or before **17th August, 2023**.

N. B. - Students' Record Books should be produced when applications are handed over.

03. LATE APPLICATIONS

Late applications will only be accepted up to **18th August, 2023** with a fine of **Rs. 15/- per day** paid to the bank (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) . **Any application will not be accepted under any circumstances thereafter.**

04. FILLING IN THE APPLICATION FORMS

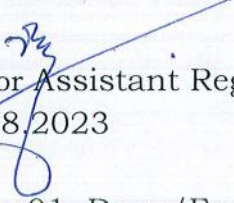
It is the responsibility of the candidates to enter all subjects (Title of Question Papers with Code Numbers) clearly in the application form. Heads of Departments may be consulted with regard to any clarification in completing the application forms.

05. REGISTRATION FEES

Candidates who are not registered for the relevant academic year should pay Registration Fees of Rs. 300.00 to the Academic and Student Services Branch.

06. 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
15.08.2023

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

Proper

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 PROPER EXAMINATION
(August/September - 2023)
PROPER EXAMINATION APPLICATION FORM**

01. Registration No : Index No :

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

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ii. Name denoted by Initials :

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

	SUBJECTS	SUBJECT CODE	SIGNATURE OF LECTURER INCHARGE CONFIRMING THAT THE CANDIDATE HAS FOLLOWED THE COURSE SATISFACTORILY AND IS ELIGIBLE TO SIT THE EXAMINATION.
i.	Adjustment Computations	FC 21212	.....
ii.	Advanced Land Surveying	FC 21114	.....
iii.	Database Management Systems	FC 21324	.....
iv.	Electricity and Magnetism	FC 21328	.....
v.	Electronic Distance Measurement	FC 21129	.....
vi.	Geometric Geodesy	FC 21241	.....
vii.	Inferential Statistics and Numerical Methods	FC 21342	.....
viii.	Land Surveying Practical III	FC 21546	.....
ix.	Management	FC 21248	.....
x.	Technical Communication	FC 21159	.....

SEAL OF THE FACULTY / DEPARTMENT

04. State whether Mr. / Ms.:

05. Permanent Address:

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06. Address during the period of Examination :

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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:

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Signature of Candidate.

- Delete as appropriate