

Colombo Regional Centre-The Open University of Sri Lanka

APPLICATION FORM

Fill the application in full with clear BLOCK CAPITAL LETTERS. Completed application has to be returned to the Colombo Regional Centre.

A: PROGRAMME- Certificate of C	ompletion of Computer Litera	cy			
BATCH NO:					
B: PERSONAL DETAILS-					
B1. Title Mr. Mrs.	Ms. Rev.				
B2. N.I.C. No	B3. Date of Birth (DD/MM/YYY	Y) B4.Age			
		Y E A R S			
B5. Initials	\Box				
B6. Last Name					
B7. Name Denoted by Initials					
		 			
B8. Permanent Address					
B9. Gender: Male Female B10: Telephone No:					
Home	Work	Mobile			
B11: E-mail Address (If Any)					



Colombo Regional Centre-The Open University of Sri Lanka

C: EDUCATIONAL QUALI	FICATIO	ONS:			
C1: GCE Ordinary Level-	Year:				
1.		6.			
2.		7.			
3.		8.			
4.		9.			
5.		10.			
C2: GCE Advanced Level-	Year:				
1.		3.			
2.		4.			
I hereby declare that the inf knowledge.	ormation	given above i	s true and accu Date:	arate to the best of my	7
					J
Signature of Applicant				(DD/MM/YYYY)	
D: OFFICE USE ONLY:					
1. Two Copies of Photograph	:-	Yes	No		
2. Paid Amount	: - Rs				
3. Paid Date	:		••••		
4. Copy of N.I.C.	:-	Yes	No		
Date:					
			Signa	ture of Checking Clerk	
Documents Re-Checked					
Registration Approved /Not	Approve	d			
Date:					
			Signa	ature of Assistant Director	