



POSTGRADUATE INSTITUTE OF SCIENCE (PGIS)
UNIVERSITY OF PERADENIYA

For office use only:

Application for Registration for M.Phil./Ph.D. Degree

- *Two copies of the completed application form should be sent to the Assistant Registrar of the PGIS. (Please attach the documents mentioned in 8 (b, c & d) to both copies)*
- *All entries should be typewritten.*
- *An employee of a university, state/private sector department/institute, should submit his/her application through the respective head of university/department/institute.*
- *After completing up to Section 11 the student should submit the application to the PGIS.*

1. PERSONAL DATA

SURNAME: Mr./Miss/Mrs. (In capital letters)			
OTHER NAMES: (In capital letters)			
ADDRESS:			Phone:
.....			Fax:
.....			E-mail:
DATE OF BIRTH	CITIZENSHIP	NATIONAL IDENTITY CARD NO.	SEX
PRESENT EMPLOYMENT (if any): 			

2. ACADEMIC DATA

2.1 Academic Qualifications Obtained

<i>University/Institute</i>	<i>Degree/Diploma with Subjects: (Do not use abbreviations ex: PGDE)</i>	<i>Year</i>	<i>Grade/Class etc.</i>

2.2 Research: Publications/Experience

(Use additional sheets if necessary)

3. OTHER QUALIFICATIONS:

(Fellowships, scholarships, awards, membership in professional bodies etc.)

4. PROGRAMME DETAILS

Degree applied for:	Board of Study:
Field of Study:	
Proposed field of research (where applicable):	
Tentative title of the thesis:	
State financial or other support available: i. For Equipment/Chemicals/Consumables : ii For Research Assistant’s Salary:	
Place(s) of work : : <i>(where the research is conducted)</i>	
Brief statement of research methodology including review of relevant literature: <i>(2 copies of the synopsis should be attached)</i>	
If the research project involves human or animal subjects or any other ethical issues, please request clearance from the PGIS Ethical Committee. Required forms can be down loaded from the PGIS website or obtain from the Director’s Office	

5. DECLARATION OF THE SUPERVISOR/S

This is to certify that I/we agree to supervise the applicant for the programme of study mentioned in the application.

Supervisor’s Name	Designation	Address	Signature
1.			
2.			
3.			

6. MODE OF REGISTRATION *(Put a cross in the relevant cage)*

Full-time	Part-time	Other

7. ANY OTHER RELEVANT INFORMATION

Have you applied for admission to this programme previously? Yes/No
If yes, give details:

Are you currently registered for another degree/diploma at the PGIS or any other university/institute?
Yes/No
If yes, give details:

Any other information:

8. DOCUMENTS TO BE ENCLOSED

- a) Two letters of Recommendation
(should be sent directly to the Director/PGIS under confidential cover and at least one should be from an academic referee)
- b) Degree/Diploma certificate/s
(certified photocopy/copies should be submitted)
- c) Certified Copy of the Academic Transcript
- d) Birth Certificate *(certified photocopy to be submitted)*
- e) Three (3) self-addressed envelopes. (22cm x 10cm)

Note: Originals of letters/ certificates should be produced at the time of registration.

9. DECLARATION OF THE EMPLOYER

(To be completed by the Head of the university/department/private or public sector institute if the applicant is an employee of such an organization).

This applicant can/cannot be released full time/part time if he/she is selected to follow the above M.Phil./Ph.D. programme.

Date:

Signature of the Employer
(Official frank)

10. DECLARATION OF THE APPLICANT

I have instructed the Registrar of the
(University/Institute) to send my academic transcript directly to the office of the Senior Assistant Registrar,
Postgraduate Institute of Science (PGIS), University of Peradeniya.

I certify that all the information provided above is correct and I agree to abide by and be subjected to the
regulations of the PGIS if this application is accepted.

I declare that I am currently NOT following any other postgraduate programmes in the PGIS.

Date:.....

.....
Signature of the Applicant

**11. OBSERVATIONS OF THE HEAD OF THE UNIVERSITY/ DEPARTMENT/PRIVATE OR
PUBLIC SECTOR INSTITUTE WHERE RESEARCH WILL BE CONDUCTED**

I certify that the facilities available in my department/institution can be utilized for the project.

Remarks if any:

Date:.....

.....
Signature of the Head of the Department/Institute

12. RECOMMENDATION OF THE BOARD OF STUDY/PGIS

- a) Field of study/subject and the Supervisors proposed for the M.Phil./Ph.D. Programme as given in Sections 4 and 5 are approved.
- b) In order to fulfil the course work requirement (*please refer to PGIS Handbook*), we recommend that the candidate complete the courses listed below:

<i>Title of Course (No. of Credits)</i>	<i>Offered under which M.Sc.Programme/ Postgraduate Certificate Course (PCC)</i>	<i>Board of Study</i>

c) Place(s) of work : : (*where the research is conducted*)

d) Requirement of a Qualifying Examination/Advanced undergraduate courses:

e) Other observations (if any):

The Board of Study recommends/does not recommend the issue of the letter of registration after the payment of prescribed fees by the candidate.

Date:

.....
Signature of the Chairman/Board of Study

In case of transfer from an M.Sc. degree programme to M.Phil. degree programme for a full – time candidate the minimum duration will be two years and nine months including the time spent for the M.Sc. programme or as specified by the PGIS.

13. APPROVAL OF THE COORDINATING COMMITTEE/PGIS

Registration is approved/not approved.

Observations (if any):

Meeting No.

Minute No.

Date:.....

.....
Signature of the Senior Asst. Registrar/PGIS