

National Institute of Library and Information Sciences University of Colombo, Sri Lanka

	For office u		Application No.	
	only		Receipt No.	
Course applied for				
Preferred Center				

1. Personal Information			
Full Name			
Date of Birth		National ID No.	
Permanent Address		Land Phone	
		Mobile Phone	
Address for correspondence		Fax	
		Email	

2. Service Inf	ormatior	1				
Office Address						
Designation				Years of service		
3. Educationa	ıl qualifi	cations				
G.C.E. O/L	School				Year	
S	Subjects		Grade	Subjects		Grade
	·					
G.C.E. A/L	School				Year	
S	Subjects		Grade	Subjects		Grade

4. Professional qualifications			
Qualification	Institution	Year	

. Other relevant information	

I certify that the above information is correct and complete. I agree to abide by the rules and regulations of this program if selected.

Date.....

ignature

6. Certification of the Head of the institution (if employed)

I understand that Mr./Mrs./Ms./Rev: working at our organization has applied for for him/her to pursue the above studies.	who is I grant/do not grant permission
Name	Signature
Designation	Official seal
Date	

Please deposit Rs. 250 as application processing fee at the Account No. 086100101191736 of Peoples Bank - Thimbirigasyaya branch and attach the receipt to the application.

Completed applications should reach the address given below on or before 2020.09.18 by post.

Senior Assistant Registrar, National Institute of Library and Information Sciences (NILIS), University of Colombo, Colombo 03.