



UNIVERSITY OF JAFFNA, SRI LANKA

Application for Study Leave

1. Name :
2. Designation :
3. Department :
4. Detail of Postgraduate qualification already obtained, if any :
5. Period for which leave is required :
6. Date of Commencing and termination of leave :
7. (a) Date of First appointment :
(b) No. of years of service at present position :
8. Previous service, if any :
9. Detail of Scholarship/award for the study, if any :

(Copy of the relevant document should be annexed)

10. Place of Study (*Name of University etc.*) and qualification to be obtained :

(Copy of the relevant document such as letter of admission /placement/registration should be annexed)

11. Field of Study :
12. Proposed title of/ Probable subject of thesis/dissertation, if any :

13. Detail of papers published in recognized journal, if any :

14. Whether application form for financial assistance for air travel is enclosed :

(Only for Probationary Lecturer who require such assistance)

Date:.....

.....

Signature of the applicant

To be filled by the Head of Department/Unit/Section

- a. Field of study pursued by other teachers of the Department/Unit/Section & Qualifications obtained :

No.	Field of study	No. of Teachers	Qualifications

- b. Date and Registration of Postgraduate degree locally, if any :
- c. Whether in the light of position set out in (11)above this training would be of benefit to the University :
- d. Whether this research or part of it could be done in Sri Lanka. If so give details :
- e. Applicant’s ability to teach in English and Tamil/Sinhala :
- f. Applicant’s aptitude, capacity etc. for research :
- g. Applicant’s ability as a University Teacher :
- h. Applicant’s conduct :
- i. Date on which Study leave is recommended :
- j. Any other Observations :

Date : Signature of the Head/ Department of

<i>Observation and Recommendation of the Dean</i>	
Date:	Signature of the Dean/ Faculty of
<i>Instruction of the Vice Chancellor</i>	
DR/Academic Establishments,	
.....	
.....	
Date :	Vice Chancellor