

UNIVERSITY OF JAFFNA – SRI LANKA

GENERAL CONVOCATION –10.01.2017, 11.01.2017 SUPPLICATION FORM

Note: In writing your name please ensures that spelling of the name confirms what appears in the Birth Certificate. If the Birth Certificate is in Tamil or Sinhala, please give the English spelling of your name as it appears in your Admission Form. Your name must be written in three languages.

Registration No:			Index No:	
/	English:			
(b) I	n Tamil:		•••••••••••••••••••••••••••••••••••••••	
(c) In	Sinhala:	••••••	•••••••••••••••••	
) Name of the	Post Graduate Degr	ree/ Degree/ Diplo	oma to be conferred:	
3) Year of pass	ing the above exam	ination and the e	ffective date of the degree :	
*	Post Graduate Degr ntia " (Please tick a	-	oma to be conferred "In Person"	
) Present Addre	ess:			
) Telephone N	Vo:	E-mail		
) Postal Addre	ess:			
) Particulars	of Payment made:	- (Payment Rece	eipt Attached) Date of Payment	
ees	Under Graduate	Post Graduate		
ipplication Fee	500.00	500.00	-	
ertificate Fee own Fee	500.00	500.00 1000.00	-	
hereby certify t	hat the above inform		and true to the best of my knowledge.	
Oate:			Signature of Applicant	