



**Application for the Short Course**  
**“Teaching Children with Learning Disabilities”**  
**Department of Special Needs Education**  
**Faculty of Education**  
**The Open University of Sri Lanka**

**Passport Size  
Photograph**

*You need to bring  
two photographs  
when you get  
registered at OUSL.  
Therefore, do not  
paste the  
photograph, when  
you apply.*

**For Office Use Only**

Registered Date : DD/MM/YY Registration No. : ..... Batch No. : 15

1. Medium of the short course (Please mark X in the relevant box) : 

English		Sinhala		Tamil	
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2. Nearest OUSL regional center (Please refer the OUSL website: <https://ou.ac.lk/regstucentres/>) : .....
3. Title (Please mark X in the relevant box) : 

Mr.		Miss.		Mrs.		Dr.		Prof.		Rev.	
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4. Name with initials (In block letters, as per NIC) : .....
5. Full name (In block letters, as per NIC) : .....
6. NIC number : ..... 7. Issued date of NIC : DD/MM/YY
8. Permanent address (In block letters) : .....
9. Contact number 1 (Whatsapp number) : ..... Contact number 2 (If available) : .....
10. E-mail address : .....
11. Date of birth : DD/MM/YY 12. Age (For the date 30/09/2024) : DD/MM/YY
13. Educational qualifications (Please mark X, only for the highest qualification that you have)

Graduate		Higher diploma		Diploma		A/L		O/L		Other (If other, describe in the below)	
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14. Experience in the field of “Special Needs”

Applicable (If applicable, describe in the below)	Not applicable (If not applicable, describe the interest to study this course in below)
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I hereby certify that the above information is true and accurate to the best of my knowledge.

DD/MM/YY  
Date

.....  
Signature