

For office use:
Application Number :.....
Reg No:.....
Medium :



The Open University of Sri Lanka
Department of Secondary & Tertiary Education
Faculty of Education

The Application for the Short Course on Research Methodology in Education.

1. Full Name Mr/Mrs./Miss

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2. Name with Initials:

3. Name required for the Certificate

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4. Gender :

5. Date of Birth :

6. Private Address

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7. Profession / Designation :

8. Official Address (If any)

.....

9. National Identity Card Number :

10 Contact Numbers :

Telephone : Mobile: E-mail:.....

11. Highest Educational Qualification:

University/ Institution:

12. Expected medium of study :

I certify that the particulars given above are true and accurate according to my knowledge.

Signature :

Date: