

### FACULTY OF MEDICINE UNIVERSITY OF PERADENIYA

# APPLICATION FORM TO REGISTER FOR THE DIPLOMA IN EXERCISE & SPORT SCIENCES PROGRAM

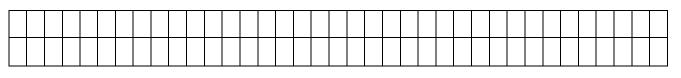
FOR OFFICE U	SE ONLY
University of Peradeniya / Other University / Other	Registration No:-

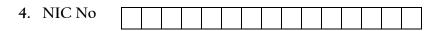
Please fill Application form in Block Letters & only in English

1. Name with Initials

2. Full Name

3. Address





5. Telephone Number

Land						
Mobile						

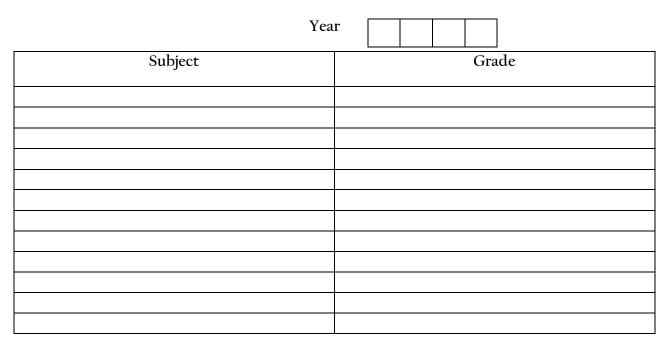
6. E-mail Address



- 7. Sex Male Female
- 8. Date of Birth D D M M Y Y Y Y

#### 9. Academic Qualifications

#### (a) G.C.E. (O/L) Examination:



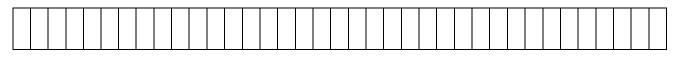
#### (b) G.C.E. (A/L) Examination:

Y	ear
Subject	Grade

#### (c)Tertiary Education:

Degree	Institute	Year

## 10. Present Employment



#### 11. Experience in the field of Sport and Exercise Science

Position	Address of the work place	From	n		То					
		DD	MM	YYYY	DD	MM	YYYY			

12. Two photographs of stamp size



13. Tick the favourite four sports from the list

1	Athletics
2	Badminton
3	Basketball
4	Physical Fitness exercise
5	Elle
6	Foot Ball
7	Hockey
8	Martial Arts
9	Netball
10	Swimming
11	Table Tennis
12	Tennis
13	Volleyball
14	Weight lifting & Cross-fit exercise

Date :....

Signature .....

You are required to submit the file of the following documents to the Diploma in Exercise and Sport Sciences program, Faculty of Medicine, University of Peradeniya.

- 1. Application form
- 2. Course payment slip

Copy of

- 3. NIC
- 4. University ID
- 5. Birth certificate
- 6. OL & AL certificates
- 7. Sport certificates
- 8. Two photographs of stamp size

Please be kind enough to make necessary payments to

Peoples Bank - Branch Peradeniya

Account Number	: 057100183373667
Name of the account holder	: Medical Faculty Research and fund
Purpose	: DESS 2023/24

Conditions:- Course fee not refundable