

# Requesting a Certificate

Name of the Doctor: .....

Student Registration No. : M/ ...../ .....

1. **Transcript** i. Local (Rs.3000.00)

ii.Foreign (Rs. 5000.00)

## 2. **Student Verification**

Dean's Letter (RS.5000.00)

ECFMG/EPIC (RS.5000.00)

WES (RS.5000.00)

Other verifications (RS.5000.00)

3. UK NARIC uploading (Rs. 2500.00)

4. Application Filling(Any) (Rs. 5000.00)

5. Clinical Rotation (Rs. 5000.00)

6. Confirmation of course Language (Rs. 2000.00)

7. Provisional Certificate (Rs. 500.00)

The amount should be paid to the

**Shroff, Accounts Branch/Faculty of Medicine**

**or**

**Peoples' Bank, Peradeniya Account No. 057-100-111-338033**

**Faculty of Medicine, University**

Transcript should be sent to .....

.....

.....

(Recipient's address (**This address must be an official address**))

Please send your application with the paying slip to

**[pdn.medicaltranscripts@gmail.com](mailto:pdn.medicaltranscripts@gmail.com)**

Signature.....

Date.....

**Payment details for EICS Verification**

To furnish the details without delay you are requested to pay Rs. 5000.00 to the faculty of Medicine. The bank details are as follows.

**Bank details**

Name of the Bank : People's Bank, Peradeniya  
Account No. : 057-100-111- 338033, Faculty of Medicine,  
University of Peradeniya  
Swift code : PSBKLKLK  
Bank Code : 7135  
Branch code : 057

Please note that any payment you may have made to other agencies is solely to cover their costs (not remitted to the faculty)

For further details please see our website [www.pdn.ac.lk/med](http://www.pdn.ac.lk/med) or +94 812388840