

**APPLICATION FOR ENROLEMENT IN THE STAFF DEVELOPMENT  
PROGRAMME: 22<sup>nd</sup> Cycle - 2020  
Staff Development Centre, University of Kelaniya**

**1. Personal Information**

1.1	Name: Ven./Dr./Ms./Mr.:
1.2	Present Position:
1.3	Department:
1.4	Faculty:
1.5	University/ Institute:
1.6	Mailing Address: ..... ..... Phone; (Res.) ..... (Office) ..... (Mobile) .....Fax ..... E-mail. ....

**2. Selection of Modules. Indicate the segment you wish to follow by checking the relevant box (See explanatory notes before completing this section).**

<i>Module No</i>	<i>Course Fee Rs.</i>	<i>Check your Selection</i>	<i>Module No</i>	<i>Course Fee Rs.</i>	<i>Check your Selection</i>
I	3100.00		6	3240.00	
2	3240.00		7	7600.00	
3	7600.00		8	3240.00	
4	3100.00		9	2680.00	
5	3240.00		10	2960.00	

**3. Applicant’s Statement :**

I wish to follow the entire programme / modules ( ..... ) of the programme as indicated above, and agree to pay Rs. (in words) .....

..... (Rs. .... ) as course fee.

.....  
Date

.....  
Signature

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**4. Recommendation of the University / Institute**

*(Note: By recommending the applicant for the Staff Development Program conducted by the University of Kelaniya, you agree to release her/him from all teaching, examination, clinical or any other duties on Fridays to enable her/him to participate in the programme without interruption)*

I hereby recommend the participation of Ven. / Dr. / Ms. / Mr. ....  
..... of the Department of .....  
..... in the 22<sup>nd</sup> Cycle of the Staff Development Program  
conducted by the University of Kelaniya.

.....  
Date

.....  
Head of Department

.....  
Date

.....  
Dean / Director of Institute

.....  
Date

.....  
Vice Chancellor / Rector of Campus