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| **UNIVERSITY OF MORATUWA****FACULTY OF ENGINEERING****DEPARTMENT OF MATERIALS SCIENCE AND ENGINEERING** |
| Application Form for **Master of Science in Materials Science and Post Graduate Diploma in Materials Science** *Intake 2025/2026* |
| **Master of Science / Post Graduate Diploma** |
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| **The Program applying for**  | M.Sc | PG Dip |
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| **PERSONAL DETAILS** |
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| **Name** | Mr. /Mrs./ Ms. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Name with Initial**  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Date of Birth** |  |  |  | **Age** |  Yrs | **Sex** | Male / Female | **Civil Status** | Single / Married |
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| **Nationality** |  | **N.I.C./ Passport No** |  |  |  |  |  |  |  |  |  |  |  |
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| **CONTACT DETAILS** |
| **Permanent Address:** | **Contact Address:** | **Office Address:** |
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| Tele: | Tele: | Tele: |
| Fax : | Fax : | Fax : |
| **Mobile No** |  |  |  |  |  |  |  |  |  |  | **E-mail** |  |
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| **ACAD`EMIC QUALIFICATIONS** |
| **State all post-secondary qualifications (Degree, Diploma etc.). \*Please attach copies of Degree ,Certificate Transcript and all other relevant documents** |
| **From****(**Month / Year**)** | **To****(**Month / Year**)** | **University / Institution** | **Degree/Diploma etc.** | **Medium of****Instruction** |
| **Name** | **Effective Date** |
| date month year | date month year |  |  |  |  |
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| **MEMBERSHIP OF PROFESSIONAL BODIES** |
| **From** | **To** | **Professional body** | **Post Held / membership Status** |
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| **ENGLISH LANGUAGE PROFICIENCY** |
| **Highest examination passed in English** |  |
| **TOEFL / IELTS / GRE score (***if available***)** |  |
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| **WORK EXPERIENCE** |
| ***List your work experience in the chronological order starting from the present occupation*** |
| **From** | **To** | **Name & Address of Organization** | **Title / Position** | **Nature of Work** |
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| **OTHER INFORMATION** |
| **A.** Source of finance for the study? **Privately / Sponsored**If sponsored, please specify the sponsor: |
| **B.** Please describe briefly your reasons for wishing to study this course and how you see it fitting into your future career. |
| **C.** Are you registered for any other postgraduate courses at University of Moratuwa? **Yes / No**If ‘Yes’, obtain the written consent of your course coordinator(s): |
| **D.** Name, designation, address & contact numbers of two referees:\****The recommendation letters produced at the interview should be from the same referees*** |
| 1. | 2. |
| **DECLARATION** |
| I affirm that all statements made by me on this form are correct. I understand that any inaccurate or false information (or omission of material information) will render this application invalid and that ifadmitted and awarded a place on the basis of such information, my candidature can be terminated at any time and I can also be subject to any penalty dictated by the rules of the University of Moratuwa. |
| **Date:** | **Signature:** |