



**DEPARTMENT OF MECHANICAL ENGINEERING  
UNIVERSITY OF MORATUWA  
SRI LANKA**



**APPLICATION FORM**

<b>COURSE CODE</b>	<b>WS-TPTCMP-01</b>
<b>COURSE TITLE</b>	<b>TRAINING PROGRAM ON TRADITIONAL AND CONTEMPORARY MACHINING PROCESS</b>

**Forward your duly completed application with copies of professional / technical certificates to**

WORKSHOP ENGINEER  
DEPARTMENT OF MECHANICAL ENGINEERING  
UNIVERSITY OF MORATUWA,  
KATUBEDDA 10400.  
OR  
EMAIL TO: [lalithad@uom.lk](mailto:lalithad@uom.lk)

**Please note that incomplete applications and delayed applications will NOT be processed.**

**For official use only**

<b>Registration No</b>		<b>Course Fee (Rs.)</b>	
<b>Remarks</b>			

**SECTION A - PERSONAL INFORMATION**

**Please use BLOCK CAPITAL LETTERS**

<b>NAME IN FULL</b>												
<b>SURNAME</b>												
<b>INITIALS</b>												
<b>PLEASE ATTACH A COPY OF YOUR NIC/PASSPORT</b>												
<b>TITLE</b>	Prof.	Dr.	Mr.	Ms.					MALE	FEMALE		
<b>DATE OF BIRTH</b>	D	D	-	M	M	-	Y	Y	Y	Y		
<b>NIC/PASSPORT NO</b>												

**SECTION B - CONTACT INFORMATION**

<b>PERSONAL</b>	<b>ADDRESS</b>												
	<b>CITY</b>												
	<b>TELEPHONE</b>					<b>MOBILE</b>							
	<b>Email</b>												
<b>OFFICIAL</b>	<b>ADDRESS</b>												
	<b>CITY</b>												
	<b>TELEPHONE</b>					<b>MOBILE</b>							
	<b>Email</b>												

**SECTION C - EDUCATIONAL QUALIFICATIONS (Please attach copies of your educational / technical certificates)**

G.C.E. ORDINARY LEVEL		G.C.E. ADVANCE LEVEL	
SUBJECTS	GRADE	SUBJECTS	GRADE
		DEGREE / DIPLOMA / OTHER COURSES	

**SECTION D - PROFESSION AND OTHER QUALIFICATIONS**

PROFESSION / DESIGNATION	
PROFESSIONAL / TECHNICAL QUALIFICATIONS	

I hereby declare that the information given above is true and accurate to the best of my knowledge.

Date 

D	D	-	M	M	-	Y	Y	Y	Y
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 Applicant's Signature \_\_\_\_\_