

Eastern University of Sri Lanka Faculty of Arts & Culture

APPLICATION FORM FOR M.Phil./Ph.D. Programme - 2018

(Geography/Tamil/Fine Arts & Drama & Theatre)

1. Programme Details

2.

	Degree applied for (M.Phil. / Ph.D.) :								
	Subject / Field of Study:								
	(If the proposed field of study is not directly relevant to the specialization, give								
	justification)								
	Enrollment sought (Part time / Full Ti	ime):							
	Medium chosen to pursue this study (English/Tamil) :								
	Proposed Title of thesis : Translation of the title in English (If the chosen Medium is Tamil)								
				,					
*	Research proposal of the proposed work si	hould be	submitted alor	ng with the application (Please use					
	separate sheet.)	moura oc	sublificed alor	ig with the application (Trease use					
2.	11 88	wings (C	Optional)						
	Name of the Supervisor :								
	Name of the Co-Supervisor (if necessar								
	Name of the Consultant/Advisor(if neo	-							
	(Please note that supervisors should be a perm specialization relevant for your research topic			•					
	Faculty Board and Senate in appointing super-		ar decision would	to be taken by felevant board of Study,					
3.	Personal Information:								
	Full Name (in English):								
	(Block Letters)								
	Name with initial/s:								
	Date of Birth :		Civil Status:						
	Gender:		Ethnicity:						
	Nationality :		Religion:						

Permanent	Address:								
E-Mail Ad	dress :								
Contact Nu									
Residence	:	Mobile:		Office :					
National Id	lentity Card No. :								
4. Educational Qualifications (Please attach certified photo copy) (a) First Degree									
Name of the University/ Institution	Name of the Degree	General or Special & Duration	Effective Date	Grade / Class	Subject				
Title of Dissertation (which was submitted at your first degree):									
(b) Postgraduate Degrees / Diplomas									
Name of the University	Name of the Degree/Diploma	Duration	Effective Date	Grade / Class	Field of study				
Title of Disserte	ation (which was s	submitted at your	· postgraduate de	egrees):					
5. Employment History: (Please list in chronological order with current / most recent employer first)									
Date (From / T	Co) Name of Ir	stitution and Off	ficial Address	Position held					

		1 **				
Institution		Year		Award		
7. Research, Publications, List under: a) Publication in research b) Communication to Lea c) Others d) Current Research Acti	n Journals arned Societi					
(please Annex separate sh	eets)					
8. Language Proficiency:						
Language Highest Exa		Examination	Passed	Other Qualifications		
9. Names & Addresses of R forms for Referee Repor indicated below.			-			
First R	First Referee			Second Referee		
Name		Name				
Designation			Designation			
Address			Address			
Contact No.		Contact No.				
e-mail		e-mail				
Applicant's relationship			Applicant's relationship			
10. Other Details	_	aduate Degre		ma/any other examination in this		

6. Academic Distinctions:

11. Declaration by the Applicant:

- 1. I certify that the above informations furnished are true and accurate.
- 2. I am aware that in the event of any information being found to be false, my Registration may be cancelled.

I hereby agree to abide by all rules and regulations applicable to external student of the University. I also agree that in the event of violation of any regulation on my part, the University may if necessary cancel my registration. Date:.... Signature of Applicant 12. To be completed by present Employer (if any): not be released if he/she is selected. Recommended and forwarded. Name: Designation: Date: Signature of Employer OFFICE USE ONLY 13. A: Application processing with relevant Department Application sent to the Head of the Department ofon..... Application received from the Department on B: Application Processing with relevant Board of Study /Faculty Board/ Senate Date on which the Board of Study recommended this application: Name of the Supervisor Name of the Co-Supervisor (if any)..... Name of the Consultant (if any) Date of the Proposal Presentation: Date on which the Faculty Board recommended this application: Approved title of Research Date on which the Senate approved this application: Signature of the AR / Date Faculty of Arts & Culture