

**Centre For Open Distance Learning
Uva Wellassa University of Sri Lanka
Application form for Diploma in Community Leadership**



Course Applied For

Please fill this form in BLOCK **CAPITALS**

1. Name With Initials (Rev./ Mr./ Mrs./ Ms./)

2. Full Name

3. Postal Address

4. District

5. Province

6. Contact Telephone Nos.

Mobile

Residence

7. E mail Address

8. Date of Birth

9. Age as at applying date

10. Gender

11. Nationality

12. NIC Number

13. Educational Qualifications

(a.) G.C.E. Ordinary Level – (Please attach a certified copy of Certificate)

Year	Examination No.		
Subject	Grade	Subject	Grade

(b.) G.C.E. Advanced Level – (Please attach a certified copy of A/L Certificate) *when applicable*

Subject	Grade

(c.) NVQ Qualifications

14. Professional qualifications

15. Working experience (Give details and period)

16. Present Employment Details, when applicable (institute, post, employer etc.)

17. Are you a women community leader?

Yes	No
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18. If yes, please specify whether the sector is public sector, community-based organization, women councilor or other? (Give details)

19. Are you a currently registered or previously registered student for another course at the **Center for Open and Distance Learning**

Yes	No
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If yes, Give Details: _____
(Please submit all registration details with the copies of relevant letters)

20. Any other Relevant information that you wish to inform

Declaration by the Applicant

I do hereby certify that the above Particulars furnished by me are true and accurate to the best of my Knowledge. In the event of my application for registration being accepted, I shall abide by the rules and regulation governing external candidates of Uva Wellassa University of Sri Lanka.

Date

Signature

For Office Use Only

Selection Committee Recommendation

Recommendation of the programme coordinator	Recommended
	Not Recommended
Date	Signature

Payments Details

Description	Date received	Reference
Application Fee		
Course Fee		
Examination Fee		
Other		

Reg. No -

File Reference