

UNIVERSITY OF PERADENIYA – FACULTY OF AGRICULTURE

APPLICATION FOR REGISTRATION FOR THE NEW ACADEMIC YEAR/SEMESTER

Reg. No.....

1. Name in full: .....
2. Address: .....
3. Telephone Number: .....
4. District: ..... Province: .....
5. Date of Birth: ..... Age: .....Years: ..... Months: .....
6. Nationality: ..... Religion: .....
7. Male / Female: ..... Civil Status (Married / Unmarried).....
8. Date of Admission to the University: .....
9. Residence During term time: .....
10. Registration fees paid: .....  
Date of Payment: ..... Name of Bank: .....
11. Course of Study: ..... Dept: .....
12. Details of the previous examinations sat,

**SERIES**

1100 series  
1200 series  
2100 series  
2200 series  
3100 series  
3200 series  
4100 series

**GPA**

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Date.....

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Signature of Applicant