

Eastern University, Sri Lanka (EUSL)

Application Form

Masters of Science in Environmental Sciences (MSc in Env.Sc)

(A)]	Personal	
01	Full Name:	
02	Address and Con	tact details
	(i) Official:	
	(ii) Private:	
	(iii) email:	
	(iv) Tel:	Official
03	NIC No:	
04	Date of Birth:	
05	Sex:	
06	Whether citizen	Yes / No;
00	of Sri Lanka:	If foreigner, passport number:(Enclose the evident)
07	Marital status:	

(B) Educational Record (Attach certified true copy)

Qualification	alification Institution	Year		Degree/ Diploma	Class/Grade
Quannication	Histitution	From	То	Diploma	Class/Glaue

C) Employment Recor	l (Attach a letter fron	n the employer,	if applicable)
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Designation	Designation Institution/Department -	Year		Task	Remarks
Designation		From	То	Task	Remarks

(D) Research, Publications, Communication, etc. (Attach a separate sheet, if addition)

Title	Institution	Your position	Year	Remark

(E) Language Proficiency

	Language	Highest Examination Passed	Other Qualifications
01			
02			
03			

(F) Accommodation

01	Do you need accommodation?	Yes / No
02	If Yes, for how long?	First semester / Second Semester / The entire period

Room cost will be Rs. 5000/month for local candidates, US\$50/month for candidates from SAARC Countries and US\$100/month for other foreign candidates. Rooms are subject to the availability.

(G) Research interest
Write a brief account (250-300 words) on your subject of research interest, which could be
considered for the research component of the MSc programme.
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(H) Declaration of Applicant
I, of
hereby declare that:
(a) The information provided in my application for Master of Science in Environmental
Sciences is true and correct to the best of my knowledge, information and belief;
(b) I am a citizen of Sri Lanka/ (if foreign) and have not renounced or
lost my status as a citizen of Sri Lanka/(if foreign);
(c) I have enclosed the relevant information with the above mentioned application; I have not
made another application for the same.
Signature of Declarant: Date: Day/ month/ year
Certification by Notary Public
Made and subscribedthis day ofin the year before me.
Name: Signature & Date:
Official Title: Official Stamp and Seal
(I) Declaration by the Head of the Institution/Department
(a) I certify that the information given in the application by
are true to the best of my knowledge.
(b) The leave can be granted/ not granted during the period of study.
Name: Signature:
Name of the Institution/Department:
Date