APPLICATION FOR RE-ADMISSION TO POSTGRADUATE (PG) PROGRAMMES (PGDip/MSc Eng/M Eng/MPhil/PhD)

Postgraduate Programmes of the Faculty of Engineering, University of Peradeniya

1. **Name in Full:** …………………………….……………………………………………

2. **Registration Number:** ……...…………………………………………………………….

3. **Degree Programme Name:**………………………………..……………………...

4. **Date of Original Registration:** ………………………………………………………

5. **Current Standing in the Degree Programme above:**

   (a) Coursework[1] (if applicable):

Year	Course code	Course name	Grade

[1]**please provide certified records (signed by the AR/Engineering)**

   (b) Research (if applicable)

Name(s) of the supervisor(s):

Research topic[2]:

[2]**For research degree (PGDip/MSc Eng/M Eng/MPhil/PhD), if research topic is changing, please attach new research proposal certified by supervisors.**

Outcome(s) (attach a report if necessary):

Whether course fees are paid in full for the original postgraduate registration Yes/No

I hereby declare that the information provided above is true and accurate. I accept the full responsibility for any inaccurate information provided.

Signature:…………………… Date:…………………………

To be filled by research supervisor(s) (if applicable)

I/We declare that the information provided above under 5. (b) is true.

I/We declare that the applicant needs to carryout research at least for ……………… more months.

Name of the supervisor   Signature

1.

2.

3.

Any other comments:

To be filled the PG coordinator of the Department

The application is in order/not in order

I recommend/do not recommend the applicant to be readmitted to the programme of …………………………………….. .

Name of the PG coordinator   Date   Signature

To be filled the Head of the Department

The application is in order/not in order

I recommend/do not recommend the applicant to be readmitted to the programme of ………………………………………….. .

Name of the HOD   Date   Signature

To be filled the Director/CERPS

The application is in order/not in order

I recommend/do not recommend the applicant to be readmitted to the programme of ………………………………………….. .

Signature   Date

To be filled the Chair/FHDC

I recommend/do not recommend the applicant to be readmitted to the programme of ………………………………….. .

Minimum duration shall be ……………………………. Months.

Any other remarks:

Signature   Date

To be filled the SAB/Engineering

I hereby certify that the student has paid the fees in full for the original postgraduate programme registration.

I hereby certify that the student has paid the re-registration fee for ………………… period.

Signature   Date

To be filled the SAR/Engineering

Following student is re-registered to the …………………………………. Degree/Diploma programme of the faculty of engineering from ………………………………… .

Name:

Registration Number:

Signature   Date