**University of Colombo, Institute for Agro-Technology and Rural Sciences**

**Application for Certificate course examination for Diploma in Agro – Technology**

 **(Online Examination)**

 **8th Batch - Old Syllabus Registration No.**

Name of the Student:

1. Name in Full: ……………………………………………………………………………………….
2. Name with Initials: ………………………………………………………………………………….

|  |  |
| --- | --- |
| Permanent Address :Telephone No: | Present Address :Telephone No: |

**Courses Appearing in the First Time**

|  |  |  |  |
| --- | --- | --- | --- |
|  **Certificate Course Code**  | **Course Title** | **Number of Credits** | **Signature of Course Coordinator \*** |
| **FT** | Food Technology | 8 |  |
| **PHT** | Post-Harvest Technology | 8 |  |
| **FL** | Floriculture | 8 |  |
| **ABM** | Agro – business Management  | 8 |  |
| **FAH** | Fundamentals of Animal Husbandry  | 8 |  |

Signature of the Applicant : …………………………… Date: ………………………….

**Accounts Division**

Above named student,

1. has paid the total Semester fee
2. has arrears of Semester fee

(Due payment: Rs. …………………………………….)

Signature of the authorized Officer : …………………………

Date : …………………………

**For Office Use Only**

Recommendation of the SAR/AR (or authorized officer):…………………. Remarks: …………………

(Signature)

\*State the reason if not recommended \**\*Course which fulfilled eligibility criteria*

\*\*\* 1. Absent with medical, 2.Absent, 3.Failed, 4.Ineligible, 5.Upgrading GPA