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

**Application for Bridging Course Examination – 2020/2021 intake**

**Registration No.**

Name of the Student:

1. Name in Full: ……………………………………………………………………………………….
2. Name with Initials: ………………………………………………………………………………….
3. Year (2nd year, 3rd Year) : …………………………………………………………………………...

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

|  |  |
| --- | --- |
| **Course Title** | **Signature of Head of the Department** |
| Agronomy |  |
| Livestock Management |
| Agriculture Economics and Extensions |
| Agricultural Engineering  |
| Food and Post-Harvest technology  |

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

**Accounts Division**

Above named student,

1. has paid the total Bridging course fee
2. has arrears of Bridging course fee

(Due payment: Rs. …………………………………….)

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

Date : …………………………

**For Office Use Only**

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

(Signature)