

University of Colombo Institute for Agro-Technology and Rural Sciences
Application for Semester Registration of the Bachelor of Agro-Technology Degree
Programme

Registration for Second year First Semester

Registration No.

Name of the Student: Full Time/Part Time.....

1. Name in Full:
2. Name with Initials:
3. Permanent Address:
4. Telephone No:
5. Reference number of the payment made :.....
 (Reference number will be received to your mobile phone as a text when you completed the payment of semester fee via online payment gateway)

Academic Year:

Semester of the Student: 1 2 3 4 5 6 7 8

Course Number	Course Title	Number of Credits
AT2113	Production and Management of Plantation Crops	3
AT2122	Principles of Genetics	2
AT2132	Production and Management of Fruit Crops	2
AT2142	Agribusiness Management	2
AT2152	Basic Statistics	2
FT2112	Non-Ruminant Management	2
FT2121	Introduction to Aquaculture	1
FT2133	Food Processing & Postharvest Technology	3
CC2110	English	0

Optional Course

Course Number	Course Title	Number of Credits

Signature of the Student: Date:

Accounts Division

Above named student,

- i). has paid the total Semester fee
- ii). has arrears of Semester fee

(Due payment: Rs.....)

Signature of the authorized Officer :

Date :

For Office Use Only

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

(Signature)