



**POSTGRADUATE INSTITUTE OF SCIENCE (PGIS)**  
UNIVERSITY OF PERADENIYA

**Application for Admission to the M.Sc. Programme in  
Science Education**

For Office Use Only .....
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Please select (✓) one of the following areas of specialization.

- Biology Education**    
  **Chemistry Education**    
  **Mathematics Education**    
  **Physics Education**

FULL NAME: (Mr./Miss/Mrs./) ..... (Please write the surname in capitals)			
MAILING ADDRESS: ..... ..... ..... .....		Phone: ..... Fax: ..... E-mail: .....	
HOME ADDRESS: ..... ..... ..... .....		Phone: .....	
DATE AND PLACE OF BIRTH: ..... CIVIL STATUS:.....                      SEX (M/F): .....		CITIZENSHIP: ..... NATIONAL ID NO.: .....	
CURRENT EMPLOYMENT (If applicable): DESIGNATION & ADDRESS: ..... NATURE OF DUTIES PERFORMED: ..... YEARS OF SERVICE: ..... NAME & DESIGNATION OF EMPLOYER: .....			
EDUCATIONAL QUALIFICATIONS (including postgraduate qualification/experience): Please attach photocopies of certificate/s.			
University/Institute	Degree/Diploma etc.	Year	Class/grade

RESEARCH PUBLICATIONS (If any):  
(If necessary attach a separate sheet)

TEACHING AND OTHER PROFESSIONAL EXPERIENCE SINCE GRADUATION:

Period		School/Institute	Subjects Taught
From	To		

MODE OF PAYMENT OF PROGRAMME FEE:  
*From personal funds / By employer / Other (Specify)*

NAMES AND ADDRESSES OF TWO REFEREES :  
(Preferably a School Principal/Director of Education/University Teacher)  
*Please arrange for reports to be sent before the deadline for receipt of completed applications, to: Director, Postgraduate Institute of Science, P O Box 25, University of Peradeniya (Relevant forms are annexed).*

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I declare that the particulars given above are correct to the best of my knowledge and that I am currently **NOT** following any other postgraduate programmes in the University of Peradeniya or any other University/Institute.

Date: \_\_\_\_\_ Signature of Applicant: .....

*Note: Students enrolled for a postgraduate programme at the PGIS should not register and follow any other postgraduate programme at the PGIS/University of Peradeniya or any other university/institute in Sri Lanka or overseas, until he/she complete the degree or cancel registration.*

AVAILABILITY OF STUDY LEAVE (applicable to those who are employed):  
*State whether you are entitled to study leave for the period specified.*

RECOMMENDATION OF THE HEAD OF THE INSTITUTION:

Mr./Ms. .... is a teacher/educator presently attached to my school/institute. He/she has been teaching ..... (subject) for the last ..... years.

If Mr./Miss/Mrs. .... is selected for the above programme he/she would be/ not be released on full/part-time basis.

.....  
Signature of Head of the Institution/the School Principal

Name: ..... Designation.....

Date:..... Official Stamp: