



RAJARATA UNIVERSITY OF SRI LANKA – MIHINTALE
FACULTY OF SOCIAL SCIENCES & HUMANITIES
APPLICATION FOR MEDICAL CERTIFICATE APPROVED/ INCOMPLETE/REPEAT
SEMESTER EXAMINATION – 20.....
YEAR SEMESTER

Instructions:

Indicate √ (Tick Marks) in the relevant cage.
 Incomplete applications are rejected.

MCA	
INCOMPLETE	
REPEAT	

01. Registration No: SSH/.....

02. Index No: SH/

03. Medium:	SINHALA	<input type="checkbox"/>	Year I	<input type="checkbox"/>
	ENGLISH	<input type="checkbox"/>	Year II	<input type="checkbox"/>
			Year III	<input type="checkbox"/>
04. Examination :	BA	<input type="checkbox"/>	Year IV	<input type="checkbox"/>
	BA(HONS)	<input type="checkbox"/>		

01. I Full Name of the Candidate: (In Sinhala)

.....

II. Full Name of the Candidate: (In English) Rev./Mr./Ms.

.....

III. Name with Initials : (In English) Rev. /Mr. /Ms.....

02. Personal Address :

.....

03. E-mail Address : Telephone No:

04. Course (Students who are following BA (Hons) Degree Programmes only):

Sinhala	<input type="checkbox"/>	History	<input type="checkbox"/>	Archaeology	<input type="checkbox"/>
Environmental Mgt.	<input type="checkbox"/>	Economics	<input type="checkbox"/>	Sociology	<input type="checkbox"/>
Mass Communication	<input type="checkbox"/>				

Course (Student who are following BA (General) Degree Programmes only):

EWS	<input type="checkbox"/>	HAH	<input type="checkbox"/>	TEF	<input type="checkbox"/>
ESM	<input type="checkbox"/>	SSM	<input type="checkbox"/>		

05. Subject applied by the candidate for the repeat examination
 **(Indicate √ (Tick Mark) in the relevant cage.)

S/No.	Subject Code	Subject	Medium	2 nd Attempt	3rd Attempt	4th Attempt
i						
ii						
iii						
iv						
v						
vi						
vii						
viii						
ix						
x						

06. For Repeat/Incomplete candidates only:
 Fees for the Examination: Rs.

Date of payment:.....

Receipt No:

07. The above particulars are true and accurate to the best of my knowledge.

.....
 Date

.....
 Signature of the Candidate

To: Assistant Registrar (Faculty of Social Sciences & Humanities)

The above candidate has fulfilled / not fulfilled the requirements to appear for the examination. Therefore, I recommend / not recommend the above named candidate for the examination. (Please delete unnecessary words).

.....
 Date

.....
 Head of the Department
 Signature and the Rubber Stamp



RAJARATA UNIVERSITY OF SRI LANKA – MIHINTALE
FACULTY OF SOCIAL SCIENCES & HUMANITIES
APPLICATION FOR SEMESTER EXAMINATION – 20.....
YEAR SEMESTER

Instructions:

Indicate √ (Tick Marks) in the relevant cages.
Incomplete applications are rejected.

01. Registration No:	SSH/.....	02. Index No:	SH/
03. Medium:	SINHALA <input type="checkbox"/>	Year I	<input type="checkbox"/>
	ENGLISH <input type="checkbox"/>	Year II	<input type="checkbox"/>
04. Examination :	BA <input type="checkbox"/>	Year III	<input type="checkbox"/>
	BA (Hons) <input type="checkbox"/>	Year IV	<input type="checkbox"/>

01. I Full Name of the Candidate: (In Sinhala)

II. Full Name of the Candidate: (In English) Rev./Mr./Ms.

III. Name with Initials : (In English) Rev. /Mr. /Ms.....

02. Personal Address :

03. E-mail Address : Telephone No:

04. Course (Students who are following special degree Programmes only):

Sinhala	<input type="checkbox"/>	History	<input type="checkbox"/>	Archaeology	<input type="checkbox"/>
Environmental Mgt.	<input type="checkbox"/>	Economics	<input type="checkbox"/>	Sociology	<input type="checkbox"/>
Mass Communication	<input type="checkbox"/>				

05. Recommendation of the Head of the department regarding attendance for Lectures/Tutorials.(Please note that this should be certified by the relevant Head of the Department/Lecturer)

S/No.	Subject Code	Subject	Medium	85% Attendance (Present/ Absent)	Approved of the Head of the Department /Lecturer (With rubber stamps)
i					
ii					
iii					
iv					
v					
vi					
vii					
viii					
ix					
x					

06. The above particulars are true and accurate to the best of knowledge.

.....
Date

.....
Signature of the Candidate

To: Assistant Registrar (Faculty of Social Sciences & Humanities)

The above candidate has fulfilled / not fulfilled the requirements to appear for the examination. Therefore, I recommend / not recommend the above named candidate for the examination. (Please delete unnecessary words).

.....
Date

.....
Head of the Department
Signature and the Rubber Stamp