|  |  |
| --- | --- |
| **Proper** | **Re-sitting** |

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**RAJARATA UNIVERSITY OF SRI LANKA – MIHINTALE**

**FACULTY OF MANAGEMENT STUDIES**

**APPLICATION FOR YEAR I, II & III SEMESTER I EXAMINATIONS –AUGUST 2024**

**INSTRUCTIONS:**

*Indicate √ (Tick Mark) in the relevant cage.*

*Use separate application form for each series.*

*Please note that the incomplete application forms will be rejected.*

 **DEPARTMENT :** Accountancy & Finance **MEDIUM**: ENGLISH

 Business Management

 Information Systems

 Tourism & Hospitality Management

 Human Resource Management

 Marketing Management

**SERIES :** *(Indicate relevant)*

*( Year & Semester**1100 / 1200 / 2100 / 2200 / 3100 / 3200 /4100 / 4200 )*

01. I. Full Name of the Candidate: Rev./Mr./Ms……………………………………………………..

 ………………………………………..…………………………

 II. Name with Initials : Rev./Mr./Ms ...……………………………………..……………

…………………………....…………….…………….………...

02. Registration No : ……………………………… Index No.: ……………………..

03. Contact Address : …………………………….…………………………………….

 …………………………….…………………………………….

04. Telephone No. : Residence :………..………………

 Mobile No 01.:………..………………

 Mobile No 02.:………..………………

05. E mail Address 01 : …………………………………………………………………..

 E mail Address 02 : …………………………………………………………………..

06. Particulars of examination for each entry are sought.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S/No. | Course Code | Course Title | 85% Attendance (as present)-only for the Proper candidates | Number of previous attempt/s-only for Re-sitting candidates | Approval of the Head of the Department (with rubber stamp) |
| i |  |  |  |  |  |
| ii |  |  |  |  |  |
| iii |  |  |  |  |  |
| iv |  |  |  |  |  |
| v |  |  |  |  |  |
| vi |  |  |  |  |  |
| vii |  |  |  |  |  |
| viii |  |  |  |  |  |

***Note:*** *The maximum number of repeat attempts of a course shall be Three (03).*

*Please write Name, Registration Number, Course Code & Course Title correctly in the Application Form.*

*Students are not allowed for any changes and cancelations of the mentioned subject after the*  ***05.10.2020****.*

07. **For Re-sitting Candidates**

1. Reason for re-sitting Examination: Poor Attendance Fail Absent

 Upgrade Medical Accepted

1. Fees paid for examination & Receipt no. of payment:

Rs: Receipt No.: Date of Payment:

*(Only upgrading/Absent/Fail/Poor Attendance candidates are required to pay examination fees)*

 *Examination Fees : Rs. 60/- for one subject & Rs. 240/- for four or more subjects for each series.*

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

 …………………………. …………………………..

 Date Signature of the Candidate