

University of Colombo School of Computing Application Form to Following a Course

Staff

Name :

Designation : (Permanent / Contract / Casual)

Date of Appointment :

Division/Centre :

Name of the Course to be followed :

Course fee :

Course Duration :

Date of Commencement : Tentative Date of completion

Previous Courses Followed at UCSC:

- 1.
- 2.
- 3.

Kindly grant me permission to follow the above course.

.....
Date Signature

To be filled by the Head of the Division/Centre/Department

The request to follow the above course is Recommended / Not Recommended.

.....
Date Signature
(Official Seal)

Director's Approval

.....
Date Signature

To be filled by the Course Coordinator

The application is accepted and enrolled to the batch of the above course.

Date of commencement:

.....
Date Signature

PDC
The application is recorded and sent to the administration division for filing.

.....
Date Signature