UNIVERSITY OF COLOMBO SCHOOL OF COMPUTING

Application Form for Registration
Degree of Master of Philosophy in Computing Degree Programme

Duly complete this form and submit it along with a non-refundable application/proposal defense processing fee of LKR 20,000/USD 75

Section A: Personal Details: ➢ Please complete your personal details clearly and accurately to avoid delays in processing the application.	
Name with Initials:	
Full Name:	
Date of Birth: D D M M Y Y Y Y	
National ID/Passport No:	
Nationality:	
Postal address:	
Telephone:	
Mobile:	
E-mail:	

Section B: Academic/ Professional qualifications;

- Please include details of your academic qualifications with commencement and completion dates. If you are yet to complete your studies, please include your intended completion date.
- You are also required to provide supporting translated and certified documents to verify your academic qualifications.

B1-Bachelor's Degree: (Please list your MOST RECENT qualification first)

Name of Qualification (Eg: BSc in Computing)	Class with GPA (Eg: First Class, 2.9)	Name of the University/ Institution	Date Commenced	Date Completed	The grade obtained for the Final Year Project
1.					
2.					

B2-Professional qualification (s): (Please list your MOST RECENT qualification first)

Name of the Qualification	Institution	The grade/level obtained	Date awarded
1.			
2.			

Section C: Employment Details

- Please include details of your current employment.

Are you currently employed?

☐ **Yes** ☐ **No**

If yes, please complete the below.

Name of the organization:		
Address of the organization		
Designation		
Department/ Division:		Date appointed: D D M M Y Y Y Y
Telephone:		
Mobile:		
Email:		

Section D: Supervisor (s) Details

- Please state the name (s) of the selected supervisors here.
- The principal supervisor shall be a permanent academic staff member of the School possessing the required qualifications and experience

Principle Supervisor:		
Name:		
Designation:		
Organization:	**University of Colombo School of Computing**	
Declaration	I endorse this candidate is capable of conducting research and I give my consent to supervise the research titled …… ……	
Signature		Date
Co-Supervisor 1:		
Name:		
Designation:		
Organization:		
Telephone:		
Mobile:		
Email:		
Co-Supervisor 2:		
Name:		
Designation:		
Organization:		
Telephone:		
Mobile:		
Email:		

Section E: Research Details:

- Please provide details related to the Research Study
- Submit a research proposal according to the template given below.

Mode of study:

☐ Full Time *

☐ Part- Time

* If you opt for full-time study, please provide evidence for leave of absence from the current employer confirming your engagement in research and related activities during the entire normal working hours in a week (Annex 1)

Tentative Title of the Research:

Indicate any specialist training/resources necessary for the research

(e.g., laboratory space, specialized computing facilities, Library access, etc.).

Use the headings below to form the basis of the outline (*You may add or modify the headings as appropriate*).

i. Area of research
ii. Working Title
iii. Research Problem:
iv. Brief Literature Review (with reference to key publications relevant to the topic)
v. Research Questions(s)
vi. Scope of the study
vii. Research methodology
viii. Proposed Evaluation Approach
ix. Expected Research Contribution (s) to the Field of Computing
x. Research Plan and Deliverables (e.g. design, publications, etc.)
xi. List of References

Section F: Details of Academic Referees

- Please provide details of your academic referees below
- Two academic references on official letterheads, signed and dated must be submitted in a sealed envelope along with the application

Academic Referee 1:	
Name:	
Designation:	
Institute:	
Address:	
Telephone:	
Mobile:	
Email:	
Academic Referee 2:	
Name:	
Designation:	
Institute:	
Address:	
Telephone:	
Mobile:	
Email:	

Declaration of the Candidate:
I do hereby declare that the information on this form, or provided in support of my application is true, correct, complete, and up to date in every detail. I further declare that the details furnished by me on my Bachelor's Degree are accurate and I have been awarded the degree from a university/ institution recognized by the UGC (http://www.ugc.ac.lk/). In the event of my application for registration being accepted, I agree to abide by the regulations governing external candidates of the University of Colombo School of Computing. I agree that the university has the right to cancel my registration at any time, either if I am found to have furnished false information or if I do not abide by the regulations governing external candidates of the University of Colombo School of Computing. I have read and understood the above conditions and accept them in full.

Signature of candidate		Date	

Required Documentation

- Certified copies of academic qualifications must be attached to this application, If the qualifications are in a language other than English, please also supply certified translated copies.
- All documents submitted for assessment must be properly certified on every page.
- Documents submitted within Sri Lanka can be certified by principal of a government school, Gramaseva Niladhari of the Division, Justice of Peace, Attorney At Law, Notary Public, Commissioned officer of the Armed forces, Staff officer of the Government/ Corporation, Chief Incumbent of a Buddhist Vihara, A religious dignitary of the standing of any other religion.

Please complete the following checklist before submitting: (Tick ✓)

I. All sections of the application form are completed	
II. Signed declaration by the student	
III. Pay receipt for LKR 20,000/ USD 75 application/proposal defense processing fee (non-refundable)	
IV. Official fee sponsorship letter from the Sponsor or Funder (if applicable)	
V. Certified and translated copies of academic transcript (s)	
VI. Certified and translated copies of Degree Certificate (s)	
VII. Certified copy of the National Identity/Passport.	
VIII. Certified and translated copy of Birth Certificate	
IX. Signed Leave of Absence by the Employer (if applicable)	
X. Signed declaration by the Supervisor	
XI. Three recent photographs (Passport size)	
XII. Two Academic Referee Reports in a sealed Envelope	

Annex 1

Leave of Absence by the Head of the Institution of the Candidate (if employed)			
I certified that Mr./Ms./Mrs./Rev. …… has been permitted to carry out full-time research for the degree of Master of Philosophy in Computing at the University of Colombo School of Computing,			
Institution Name & Address			
Authorized person's name and Designation			
Telephone:			
Mobile:			
Email:			
Signature:		Date:	
Official Stamp			

For office use only;

Recommendation of the Research Committee: ➢ Put a tick (✓) where appropriate		
Evaluation: The candidate has satisfied/ not satisfied the minimum eligibility requirements as follows:		
1. Basic Entry level qualifications		
a	A Master's Degree in Computing from a University or an Institution recognized by the UGC	☐
b	An Honours Degree in Computing with First or Second Class from a University or an Institution recognized by the UGC	☐
c	Any other Honours Degree in Mathematics, Statistics, Physics, Electrical Engineering, Electronics Engineering, and Telecommunication Engineering disciplines with First or Second Class from a University or an Institution recognized by the UGC	☐
2. The candidate has successfully passed GCCT		☐
3. The candidate has submitted a research proposal in the acceptable standard		☐
Recommended to Proceed Remarks (if any):		☐ **Yes** ☐ **No**

Name of the Research Committee Member	**Signature**	**Date**