

FACULTY OF ALLIED HEALTH SCIENCES  
UNIVERSITY OF PERADENIYA

To : Dean/Faculty of Allied Health Sciences

**Initial Submission of the Thesis - M.Phil/Ph.D**  
(Soft bound form) Certification

This is to certify that the thesis titled .....  
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is based on the work carried out by Dr./Mr./Mrs./Ms.....  
under my /our supervision at the .....  
(Department/Laboratory/Institute). The thesis has been prepared according to the format stipulated in the Rules & Regulations for the award of Higher Degrees, Faculty of Allied Health Sciences, and it is of acceptable standard.

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