

FACULTY OF ALLIED HEALTH SCIENCES
UNIVERSITY OF PERADENIYA

To : Dean/Faculty of Allied Health Sciences

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

This is to certify that Dr./Mr./Mrs/Ms.....
has carried out the corrections/modifications to the thesis titled.....
.....
.....
as suggested by the Board of Examiners. 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.

Certified by :

Supervisor 1

Signature :..... Date :.....

Supervisor 2

Signature :..... Date :.....

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