

**FACULTY OF ALLIED HEALTH SCIENCES
UNIVERSITY OF PERADENIYA
APPLICATION FOR PROVISIONAL CERTIFICATE**

Please Note:

- a) No certificate will be issued to candidates who have not produced their Student Record Book, Student Identity Card and letter from the Bursar and the Senior Assistant Registrar/ Student Services of this University stating that they have settled all arrears of fees due to this University.
- b) Applicants should send in their applications at least one week before the date they required the certificate.
- c) **FEES:** **Rs. 2500/-** = **Within 5 working days**
- d) Each application must be accompanied by a bank deposit slip as proof of payment of the relevant fee to one of the following bank accounts or to the Shroff Counter of the University.

Peoples Bank C/A No - 057100121338023

BOC C/A No - 0001273343

Surname : (Miss/Mr.).....

Other Name in full:.....

Postal Address:

Contact Number:

Date of Entry to the University & Batch:.....

Department & Course of Study:.....

Registration No.....

Results: **Pass / 2nd Lower / 2nd Upper / 1st Class**

Date of completion:.....

Address where the Provincial certificate should be sent:

Number of copies needed:.....

Date:

Signature of Applicant.....