

**UNIVERSITY OF COLOMBO, SRI LANKA**

**DEPARTMENT OF FINANCE**

For office use only

Application No

2022/………...

**FACULTY OF MANAGEMENT & FINANCE**

**Application for the Postgraduate Diploma in Banking and Finance (PGDBF) 2022 -2023**

**Programme**

Instruction for Applicants

• All sections in this application must be completed fully and accurately. Incomplete applications and /or curriculum vitae in lieu of application will not be accepted.

• Use extra papers, if necessary, to furnish additional information.

• Please attach copies of educational / professional certificates and service certificates obtained from employers for adequate proof of experience.

**1. Personal information**

a) Name in Full: Rev./Dr./Mr./Ms./ ……………………………………………………………………………………….

(Use Block Letters).…………………………………………………………………………………… b) Name with initials: …………………………………………………………………………………… c) Contact Details :

|  |  |  |
| --- | --- | --- |
|  | **Residence** | **Office** |
| Address |  |  |
| Contact Number |  |  |
| E-mail address |  |  |

d) NIC / Passport No: ………………………………………….

e) Date of Birth: Day Month Year Age f) Sex :( Please tick ‘√’) Male Female

**2. Academic Qualifications** (Attach photocopies of relevant certificates)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **University/****Institute** | **Period** | **Main subject /****Specialization** | **Degree & Class** | **Month & Year** |
|  |  |  |  |  |

**3. Professional Qualifications** (Attach photocopies of relevant certificates)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Institute** | **Period** | **Field of study /****Training** | **Qualifications** | **Month & Year** |
|  |  |  |  |  |

**4. Work Experience** (Attach photocopies of service certificates and/or evidence for Managerial

/Entrepreneurial / Consultancy experience)

|  |  |  |
| --- | --- | --- |
| **Organization** | **Period of Service** | **Position held** |
| **From** | **To** | **No.of years** |
|  |  |  |  |  |

\*Start with yours present employment

**5. Briefly describe the nature and responsibilities of your current position:**

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**6. Career Aspiration:**

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**7. Management Training:**

(Briefly describe any management training you have obtained, including short – team courses , workshops etc. and attach the certificates of those , if any)

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**8. Funding**

a. Mode of financing your PGDBF programme

Private Sponsored Undecided b. If sponsored , by whom?

……. ……..…………………………………………………………………………………………………………………………

**9. Reasons for Reading for PGDBF**

(Briefly describe the reasons why you wish to enroll in a PGDBF Program at the , University of Colombo)

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**10. List other information including your personal/career interest, which you feel, may be useful to the Admission Committee in the evaluation of your application**

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I am prepared to abide by the rules and regulations of the University of Colombo, Sri Lanka. I certify that the above particulars given by me are true and accurate to the best of my knowledge and am aware that misrepresentation in the application will cause rejection of application or revoking of acceptance for admission and that an incomplete will be rejected.

Date ………………………………….. Signature of Applicant …………………….............

**Duly completed application should be returned to the following address with application processing fee Rs. 2000/= on or before 30th September 2022**. You are kindly requested to deposit the application processing fees to any branch of the People’s Bank in Sri Lanka to the Main Collection A/C of the University of Colombo under the **Reference No. 312041000005**

and send us the copy of your payment slip along with your application. *(if you encounter any problem regarding this payment, please advise the officer in charge of the Bank to use “Bill payment mode” or call Senior Assistant Bursar, Faculty of Management and Finance, University of Colombo on 011-2583106).*

Coordinator – PGDBF Program

Department of Finance

Faculty of Management & Finance

University of Colombo

Colombo 03

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077 1960805 Website[: www.mgmt.cmb.ac.lk](http://www.mgmt.cmb.ac.lk)

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Academic Qualifications Professional Qualifications Work Experience

Other Qualifications

Recommendation of the selection committee

Accepted Rejected QEC

Signature :…………………….

Date :…………………….