	Application to Register as an Undergraduate Student CINEC CAMPUS (PVT) LTD & DALIAN MARITIME UNIVERSITY Please complete in blue ink or type	Affix a passport size Photo in here and submit an additional photo at the registration			
01.	Proposed Programme Details				
	Title of the ProgrammeBSc in International Management and Lo	-			
	Code BScC-550 / 20-15				
02.	Personal Details Title (<i>Mr/Ms</i>) Surname/Family Name				
	First/Given Name(s)				
	Previous Surname (if changed)				
	Date of Birth DDMMYYYY Gender National ID/Passport Number				
	Permanent Address Semeste	r-period Address			
	Telephone (Day)Telephone (Evening)Telephone (Mobile)FaxE-mail				

Citizenship

Proposed Source/s of Finance (If it is not self-financing, Please provide the contact details of the financier)

04. Special N	eeds
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Please mark the relevant box indicating if you have any physical or other disability that might affect your studies or may require special support/facilities. (*The information provided may be used in making appropriate arrangements for support in your studies*.)

Yes No

Year: Index N	√o:	Year:	Index No:
Subject	Grade	Subject	Grade
GCE A/L			
School Attended:			
Year: Index M	vo:	Year:	Index No:
	Grade	Subject	Grade
Subject			

06. Professional Qualifications Please include copies of certificates/attestations. (<i>Continue on a separate sheet of paper, if necessary.</i>)					ie on a
Awa	arding Body	Qualification	Areas of Studies	Average grades, if relevant	Award Date

07. Work Experience (where relevant) (*Please continue on a separate sheet of paper, if necessary*)

Duration of Employment	Name of the Employer	Brief description of work and responsibility

English Language If ever any English language test is taken, please provide copies of certificates/attestations. Tests taken and their score Date DD MMYYYY

09. Further Information

Please provide (*on a separate sheet of paper*) any other relevant information to support your application, including your reasons for wishing to undertake undergraduate study at CINEC.

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10. References

Please provide names and contact details of two non-related referees.

Telephone	Telephone	
Fax	Fax	
E-mail	E-mail	

11. Please indicate how you found out about the Undergraduate Programme for which you are applying.

Prospectus [Website [Colleague/friend [Advertisement (please state) [Other (please state) [

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12. Data Protection Act

The University (DMU) requires information on this form for education purposes and your personal data will be processed in accordance with the University's registration and current data protection legislation.

13. Declaration

Have you ever been convicted for criminal m	nisdemea	anour?	(If
<i>YES', please explain on a separate sheet)</i>	Yes	No	

I confirm that the particulars given in this form are to the best of my knowledge and belief correct, and that, if admitted to the University, I shall abide by the Statutes, Ordinances and Regulations of the University.

Applicant's Signature

Date

For Office Use Only

Received by	
Received on	
Signature	
Accept / Reject	
Name of the HOD	
Date	
Signature	
Special Notes	

Form 1

REFERENCE FOR AN APPLICANT FOR UNDERGRADUATE STUDY Please complete in blue ink or type.

PART A: TO BE COMPL	ETED BY THE APPLICANT	
Applicant Details Surname/Family Name First/Given Name(s)		
Proposed Programme Title of the Programme Code	Details	
	ice here or attach a statement on official paper. In at the bottom of this page.)	
Name of the Referee Designation Name of Institution and	Full Address	
Signature		
Date		
Official Stamp	Fior	rm 2
of 9		

REFERENCE FOR AN APPLICANT FOR UNDERGRADUATE STUDY Please complete in black ink or type.

PART A: TO BE COMPLETED BY THE APPLICANT

Applicant Details

Surname/Family Name First/Given Name(s)

Proposed Programme Details

Title of the Programme Code

PART B: REFERENCE

Please give your reference here or attach a statement on an official paper. (*In any case, please sign at the bottom of this page.*)

Name of the Referee	
Designation	
Name of Institution and Full Add	dress
Cianatura	
Signature	
Date	
Official Stamp	

DOCUMENT CHECK LIST

When submitting the Application Form, please mark the checklist (see below) appropriately, and make sure that all relevant documents have been included.

Thank you.

Documents Check List

- □ Completed and duly signed Application Form
- □ Two passport size photo
- □ Two copies of your certificate of birth
- □ Two copies of your ID/Passport
- □ Two Copies of your O/L certificate
- □ Two Copies of your A/L certificate
- □ Two Letters of Reference

Please return to

Department of Logistics and Transport Faculty of Management and Social Sciences, CINEC Campus (Pvt) Ltd Millennium Drive, IT Park, Malabe CO 10115 Sri Lanka

FOR OFFICIAL USE ONLY



Department of Logistics and Transport Faculty of Management & Social Sciences



Registration Form Undergraduate Students

Manager, Department of Finances CINEC Campus (Pvt) Ltd Millennium Drive, IT Park, Malabe

Information of the prospective student

Name of the Student	
Address	
ID/Passport Number	
Date of Birth	
Telephone Number	
Programme of study	BSc in International Transportation
	Management and Logistics
Programme Code	BScC-550
Batch Number	20-15
Registration Fee	USD 500

The student as above noted has been accepted to study for BSc in the subject as noted above and request, therefore, to register him/her as a student according to information provided in here.

Thank you

Signature		Official Stamp
	Prof. Lalith Edirisinghe	
	Dean,	
	Department of Logistics and	
	Transport,	
	Faculty of Management and	
	Social Sciences	
Date	/2020	

Student Number	
Registration Number	
Signature of the Cashier	
Date	