

## Application to Register as an Undergraduate Student

**CINEC CAMPUS** 

Affix
a passport size
photo
in here
and submit
an additional
photo
at the Registration

01.	Proposed Programme Details					
	Title of the Programme  Bachelor of Management (Hons) in Retail Marketing and Branding					
	Code BMgt-555/					
02.	Personal Details Title (Mr/Ms)					
	Surname/Family Name					
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	First/Given Name(s)					
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	Previous Surname (if any)	$\overline{}$				
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	Gender					
	National ID/Passport Number					
	Permanent Address					
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	Telephone (Day)					
	Telephone (Evening)					
	Fax					

E-mail

03.	<b>Finance</b> Relationsh	ip				
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	Proposed S (If it is not	•				
	Please prov					
	details of th					
04.	Please mandisability to support/fa	rk the releve hat might of cilities. ( <i>Th</i>	affect your s	studies or m on provided	u have any phys ay require speci may be used in r studies.) Yes	al
05.	Contact I	Details of	f the Parei	nt / Guard	· • • • • • • • • • • • • • • • • • • •	140
05.	Name:		tile Parei	iit/ Guai u	iaii	
	Address:					
	Tel: Mob	ile		Home	2	
06.	Academic Please inclu GCE O/L	-	of certificat	es and simil	ar	
	School Atte	ended: Index No	:	Year:	Index No	:
	School Atte Year:	Index No	Grade	Year:		: Grade
	School Atte	Index No		Year:	Index No Subject	
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	School Atte Year: Subject  GCE A/L School Atte Year:	Index No  ended: Index No	Grade		Subject  Index No	Grade

Please include copies of certificates/attestations. (Continue on a separate sheet of paper, if necessary.)							
Awarding Body	Qualification	Areas of Studies	Average grades, if relevant	Award Date			
	<b>perience (where</b> Intinue on a sepa		paper, if necessa	ry)			
Duration of Employment	Name of the Employer	Brief d	escription of work a	and			
Employment	Employer		responsibility				
09. English L	anguage						
If ever an	If ever any English language test is taken, please provide copies of						
	certificates/attestations. Tests taken and their score						
Date	D MAA VXXXX						
Д	D MM YYYY						

#### 10. Further Information

**07.** Professional Qualifications

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.

11.	References Please provide names and contact details of two non-related referees.								
			<u> </u>						
	Telephone		Telephone						
	Fax		Fax						
	E-mail		E-mail						
12.		icate how you for		out the Undergra	duate				
	Prospectus Website	,							
	Colleague/f								
	Advertisem Other (plea	ent (please state) se state)							
13.	Data Protection Act CINEC Campus (Pvt) Ltd requires the information on this form for education purposes and your personal data will be processed in accordance with the Campus's registration and current data protection legislation.								
14.	Have you e	onvictions		misdemeanor? ( <i>If</i>	'YES',				
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	ountry and wou			aws, rules and regulati licies and codes of con					
	Applicant's	s Signature							
0	Date								

### For Office Use Only

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

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

Applicant Details Surname/Family Name First/Given Name(s) Proposed Programme	Details
Title of the Programme Code	
	nce 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	

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

PART A: TO BE COMPLETED BY THE APPLICANT						
<b>Applicant Details</b> Surname/Family Name First/Given Name(s)						
<b>Proposed Programme</b> Title of the Programme Code	Details					
	ce here or attach a statement on an official ase sign at the bottom of this page.)					
Name of the Referee						
Designation						
Name of Institution and Full Address						
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.

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Completed and duly signed Application Form
Two passport size photos
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 Management & Business Studies Faculty of Management and Social Sciences CINEC Campus (Pvt) Ltd Millennium Drive, IT Park, Malabe CO 10115 Sri Lanka



### Department of Management & Business Studies 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

morniacion of the prosp	ective student
Name of the Student	
Address	
ID/Passport Number	
Date of Birth	
Telephone Number	
Programme of study	BMgt (Hons.) in Retail Marketing and
Trogramme or study	Branding
Programme Code	BMgt-555
Batch Number	
Registration Fee	LKR

The student as above noted has been accepted to study for BMgt 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	Prof. Lalith	Official Stamp
	Edirisinghe	
	Dean	
Data	Faculty of Management	
Date	& Social Sciences	
	//	

Student Number	
Registration Number	
Signature of the Cashier	
date	