ශුී ලංකා විතාග දෙපාර්තමේන්තුව DEPARTMENT OF EXAMINATIONS, SRI LANKA

PRACTICAL EXAMINATIONS IN WESTERN MUSIC 20......

ENTRY FORM

This form must be completed legibly and accurately and forwarded to the Commissioner General of Examinations, Organization & Foreign Examinations Branch, Department of Examinations, Pelawatte, Battaramulla by Registered post. The name of the Examination should be written on the top left hand corner of the envelope. These Examinations will be held in Colombo, Galle, Kandy, Badulla and Kurunegala.

Any centre which does not have a sufficient number of candidates will be cancelled and the respective candidates will be directed either to the centre of their Second Choice or to a suitable Centre.

CENTRE S	ELECTED
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1 st	Choice: 2 nd Choice:								
1.	(i) Name with Initials: Mr./Miss/Mrs. (In block Capitals: This name must be used at all stages of the examination), (Ex: PERERA, C.N.A.)								
	(ii) Names denoted by Initials:								
2.	Permanent Address:								
	(for dispatch of Admission Card) Tele. No.								
3.	Date of Birth: Day Month Year 4. Sex Male / Female								
5.	(i) Grade/Diploma applied to be examined: (ii) Aspect to be examined: (Piano, Violin, Cello)								
6.	To be perfected only by Candidates Applying for Grade VI – VIII Practical Examination. * (a) Year of passing G.C.E. (O/L) Western Music:								
7.	To be perfected only by Candidates Applying for National Diploma in Western Music. *								
	(a) Year of passing Grade VIII Theory: Grade obtained: Index No.: (b) Year of passing Diploma General Paper: Grade obtained: Index No.:								

^{*}Please attach the photocopies of the relevant certificates having certified them as the true copies by the attestor

8.	Fees paid	Rs.				
			CAGE 1	FOR RECEIPT		
GI GI DI Ca	RADE II - Rs RADE III - Rs PLOMA TEACI	d affix the rece	ipt for examin	- Rs. 600/- - Rs. 800/- - Rs. 800/- DIPLOMA PE ation fee paid at a	Grade VII Grade VIII RFORMERS - Rs. post office. They a	
9.				is correct. I do here tes issued by the Con		
10.	Attestation of 1	Identity.				
	I certify that the today.	e above named car	ndidate who is pe	rsonally known to me	placed his / her signat	ture in my presence
		Signature of Cand	idate		Signature	of Attestor
					Date	
Name	e of Attestor					
Desig	gnation / Status					
Addr	ess					
over, digni	The Attestation or Notary Public, of Head of a Govern	required on this for a permanent Goment / Director Nor the Grama Nil	orm should be m overnment office Managed / approv	ade by a Justice of the or in receipt of an ann yed School or the incuivision, or a Principa	Peace, Commissioner ual consolidated salar umbent of a place of	ry of Rs. 240 360/- or worship or a religious

Rs.