**department of building economics**

**Faculty of Architecture, University of Moratuwa**

**APPLICATION FOR POSTGRADUATE STUDIES**

**MSc / PG Diploma in Project Management**

Please Fill the Application Form Typed (NOT Handwritten)

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| **PERSONAL INFORMATION** |
| 1. **Title**

[ ]  Mr.[ ]  Ms. | **2. Name in Full (BLOCK LETTERS):** | **4. Date of Birth** |
| **yyyy.** | **mm.** | **dd.** |
| **3. Name with Initials (BLOCK LETTERS):** | **5. Age**  |  |
| **6. National Identity Card No** |  |
| **7. Contact Details**  |
| **7(a) Home Address** | **7(b) Official Address** | **7(c) Contact Address** |
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| **Tel:** |
| **Tel/Fax:**  | **Mobile:** |
| **Tel:**  | **Email:**  | **Email:** |
| **PREVIOUS EDUCATIONAL QUALIFICATIONS (Please Attach Copies of Certificates and Academic Transcripts)** **Note: Academic Transcripts with the Effective Date of the Qualification is COMPULSORY** |
| **8(a) University / Institute** | **8(b) Degree Name** | **8(c) Area of Specialization** | **8(d) Duration of Programme****(1, 2, 3, 4, or 5 Years)** | **8(e) Effective Date of Graduation (As in the transcript)** | **8(f) Attendance****(Full Time / Part Time)** | **8(g) Mode****(Internal / Distance / Top-up)** | **8 (h) Class or Grade** |
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| **PROFESSIONAL QUALIFICATIONS (Please Attach Copies of Certificates)****Note: Copies of Certificates with Membership Effective / Award Date and If the Membership is Obtained through an Academic Route, Transcript is COMPULSORY** |
| **9(a) Membership Category** | **9(b) Professional Institution** | **9(c) Membership Award Date** | **9(d) Field of Specialization** | **9(e) Membership Obtained Through an Academic Route****Yes / No** |
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| **DETAILS OF RELEVANT EXPERIENCE AFTER THE EFFECTIVE DATE OF DEGREE OR PROFESSIONAL QUALIFICATION** **(Starting from the Present) (Attach All Service Letters indicating Duration)** |
| **10(a) From (Month / Year)** | **10(b) To (Month / Year)** | **10(c) Company / Organization** | **10(d) Title / Position / Designation** |
| **Month** | **Year** | **Month** | **Year** |
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| **11. Are you registered for any other postgraduate course?** [ ]  **Yes** [ ]  **No** **If ‘Yes’, please give details:** |
| **REFEREES** |
| Names and Contact Details of two Non-Related Referees. **Use** **the attached referee report form to provide two references from below mentioned referees under sealed envelope in support of your application.**  |
| 12(a) Name:  | 12(b) Name:  |
|  Designation:  |  Designation:  |
|  Address:  |  Address:  |
|  Tel:  |  Tel:  |
| **DECLARATION OF APPLICANT** |
| I certify that the above information is true and correct to the best of my knowledge and I accept the decision of the admission board as final in the event my entry to the course is rejected. I understand that any inaccurate or false information (or omission of material information) will render this application invalid and that, if admitted and awarded a place on the basis of such information, my candidature can be terminated and I can also be subject to any penalty dictated by the rules of the University of Moratuwa.**Date:** ……………………………………………… **Signature of the Applicant:** ……………………………………………… |
| **DOCUMENTS** |
| Please make sure that you submit the duly filled and signed application form including all supporting documents in **one (01) PDF file, which is 20 MB or less** (please email the files only in pdf format). |
| I declare that I have attached the following documents (Please tick the check box with ‘X’ and confirm) |
| Degree Certificates Degree Academic Transcripts Professional Qualification Certificates Service/Appointment Letters from Employers Employer’s Consent Letter (If available)National Identity CardApplication Processing Fee Receipt/Paying-in-voucher  | [ ] [ ] [ ] [ ] [ ] [ ] [ ]  |
| \*\* The application processing fee of Rs. 2,000/- may be paid either to University Shroff or as a pay-in voucher obtainable at any Bank of Ceylon branch to the credit of “**University of Moratuwa**” Account No. **70993353**. Clearly State ‘Your Name’, ‘NIC Number’ and ‘MSc PM’ on the voucher. |