

University of Vocational Technology
University College of Ratmalana
Registration of Students for the Academic Year - 2024

Student Registration No:

Student's Personal Information																																																																															
Name with Initials :																																																																															
Name in full (Use Capital Letters) :																																																																															
<table border="1" style="width: 100%; border-collapse: collapse; height: 30px;"> <tr><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td></tr> <tr><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td></tr> <tr><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td><td style="width: 5%;"> </td></tr> </table>																																																																															
Permanent Address :																																																																															
Contact Numbers :																																																																															
Mobile :										Residence :																																																																					
Email :																																																																															
Residential District :																																																																															
Date of Birth :																																																																															
D					M					Y					Age on the Date of					Years					Months					Days																																																	
Registration :																																																																															
National Identity Card										Gender					Male					Female																																																											
										Civil Status					Single					Married																																																											
Course Information																																																																															
Name of the Course :																																																																															
Entry Level Qualification :																																																																															
NVQ Stream										G.C.E.(A/L) Stream																																																																					
Education																																																																															
Highest Level Examination Passed																																																																															
Year 10					G.C.E.(O/L)					G.C.E.(A/L)					Other																																																																
G.C.E. (O/L)										G.C.E. (A/L)																																																																					
Index No :					Year :					Index No :					Year :																																																																
Subject					Grade					Subject					Grade																																																																
1					6					1																																																																					
2					7					2																																																																					
3					8					3																																																																					
4					9					4																																																																					
5					10																																																																										
Students with NVQ Level IV Qualification																																																																															
Name of the Qualification																																																																															
Qualification Code										Effective date of the Qualification																																																																					
Mode of Assessment										RPL					YES / NO					Accredited Course					YES / NO																																																						
If accredited Course , Name of the Training Center																																																																															

I do hereby certify that the information furnished above is true and correct and I have not registered for a full time Degree or Diploma or any another course in a University or any other state educational Institution in Sri Lanka.

I also hereby state that I am prepared to accept discontinuance from the training programme without any claim for compensation, if any of the above information is found to be false or inaccurate even after the commencement of the Study programme.

Office Use Only				
Student Registration No		Date of Registration		
Documents handed over to the UC Registrar's Office				
Copy of Birth Certificate	YES		NO	
Original School Leaving Certificate	YES		NO	
Copy of National Identity Card	YES		NO	
Copy of educational Qualification Certificates	YES		NO	

Payments made:				
Student Guide Book	YES		NO	
Student Record Book	YES		NO	
Entered by:	Checked by:	Registrar:		