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NATIONAL INSTITUTE OF EDUCATION

Postgraduate Diploma in Education Management Program Full Time 2021 –Sinhala, Tamil and English Medium

01.	Title	Rev.	Mr.	Ms.						
02.	Name in Full :									
03.	Name with Initials :									
04.	Address:									
	Official		Persona	.1						
	Phone		Phone							
	E-mail									
05.	Whatsapp Number									
06.	National ID No.									
07.	Date of Birth D D M M Y Y Y Y									
08.	Medium Sinhala Tamil English									
09.	Present Post :									
10.	Period of Service (years): Teaching Lecturing Administ	g ration Managen	nent							

11.	Service you belong to:	SLEAS		SLPS		SLTES	SLTS- I		Semi Gov./Pirivena		
12.	Qualifications: Academic	First Degree									
	Professional	Trained/NCOE				DE	B.Ed.		Master of Edu.		
I certify that the above mentioned information is correct. I also declare that I am not following a full-time/part-time course at the National Institute of Education or a full time study program in any other higher education institution.											
Date						Sig	nature of t	he a	applicant		
Recon	nmendation of the head of insti	<u>tution</u>									
Is curr And th	by that Rev. /Ms. /Mrs. /Mr ently employed in this institution that the person can be released/can the event of being selected to for	n as nnot be re	leased	d from d	 utie	s for the f	ull-time st	 udy	program for o	ne	
If not 1	recommending the application, p	lease state	reaso	ns belov	v:						
Date:						Nai	me and Sig SEAI		ture		
Addre	of Institution:ss:										