



Faculty of Graduate Studies
University of the Visual and Performing Arts

No.21, Albert Crescent, Colombo 07
 Tel: +0113461502 | +940713482818

Short Course on Research in Visual and Performing Arts

<http://vpa.ac.lk/faculty-of-graduate-studies> | fgs.vapa@gmail.com

Application Form

Name in Full (in block letters).....

Name with initials:.....

Title (Mr/MS/Rev):..... Gender:

Date of Birth:.....

Citizenship:..... ID/Passport Number.....

Telephone..... Email:.....

Permanent Address.....

.....

Employment & Official Address:.....

.....

Details of Degrees/Diplomas obtained (Copies of the certificates should be attached):

Degree/Diploma	University	Year	Subject	GPA & Class

If you have already registered in other programs offered by the Faculty;

Name of the Program:..... Registration No:.....

I certify that the above information is true and correct.

Date

.....
 Signature of the Applicant