



**UNIVERSITY OF RUHUNA  
FACULTY OF GRADUATE STUDIES**

**Application for Admission to the  
Master in Business Management (MBM) Degree Programme - 2024/2025 (7<sup>th</sup> Batch)**

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Where space is insufficient, please include details on a separate sheet of paper and attach to this form.

<b>1. PERSONAL DATA</b>			
Name in Full: (USE BLOCK CAPITALS)	Mr./Ms.		
Name with initials	Initials:	Last Name:	
Gender			
Date of Birth	Day	Month	Year
Civil Status			
NIC No.			
Permanent Address			
Official Address			
Address for Communications			
E-mail Address			
Telephone	Home		

	Office				
<b>2. ACADEMIC QUALIFICATIONS</b>					
<b>(Attach copies of certificates. Do NOT send originals)</b>					
Institution	Period	Major Field	Degree/ Diploma	GPA /Class ( if any)	Year
<b>3. PROFESSIONAL QUALIFICATIONS</b>					
<b>(Attach copies of certificates. Do NOT send originals)</b>					
Institution	Period	Field of Study	Qualification	Year	
<b>4. WORK EXPERIENCE (Attach support documents)</b>					
Organization	Position held	Period	Duties and Responsibilities		

<b>5. OTHER QUALIFICATIONS (if any)</b>				
<b>6. RESEARCH WORK (if any)</b>				
List research topics and nature of the research activity undertaken.				
<b>7. PUBLICATIONS (if any)</b>				
<b>8. ACADEMIC AND/OR PROFESSIONAL HONOURS OR AWARDS (if any)</b>				
<b>9. SELF ASSESMENT OF PROFICIENCY IN ENGLISH (indicate by 'X')</b>				
Proficiency	Very Good	Good	Fair	Weak
<i>Reading</i>				
<i>Writing</i>				
<i>Conversation</i>				
<b>10. FINANCE</b>				
Source of Finance	Private	Sponsored	Other	Undecided
How do you plan to financial your studies?				
If sponsored –by whom?				

If other (please indicate)	
<p><b>11. REASONS FOR STUDY</b></p> <p>Briefly describe your reasons to enroll in the Masters in Business Management Degree.</p>	

I certify that the above information is true and correct. I understand that misrepresentation in the application will cause rejection of the application or revoking acceptance for admission at any stage.

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Signature of the Applicant

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Date

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*Send this application with relevant documents under registered mail to:*

Senior Assistant Registrar  
Faculty of Graduate Studies  
University of Ruhuna  
Matara

*Please write on the top left hand corner of the envelop "Ruhuna MBM Programme".*