



EASTERN UNIVERSITY, SRI LANKA
POSTGRADUATE STUDIES UNIT
FACULTY OF COMMERCE AND MANAGEMENT
MASTER OF BUSINESS ADMINISTRATION PROGRAMME

For office use only Application No:..... Date:.....

APPLICATION FOR MASTER OF BUSINESS ADMINISTRATION 2018/2019

1. Personal Information

1.1. Name in Full: (Rev./Dr./Mr./Mrs./Miss.):

(Use block letter)

1.2. Name with initial/s:

1.3. Date of Birth:

1.4. Age:.....

1.5. Sex:.....

1.6. Civil Status:.....

1.7. Nationality:.....

1.8. N.I.C/Passport No:.....

1.9. a. Residential Address:.....

b. Telephone No:.....

c. Mobile No:.....

d. E-mail Address:.....

1.10. a. Present Position:.....

b. Office Address:.....

c. Telephone No:.....

d. Fax No:.....

1.11. Postal Address:.....

2. Academic Qualification/ Professional Qualifications (Attach photocopies of the relevant certificates)

University/ Institute	Period	Main Subjects/ Specialization	Degree & Class	Month & Year

3. Applying Category:

- a. Category 1 GPA
- Category 2 GPA
- Category 3 GPA

b. University where the Postgraduate Diploma in Management (PGDM) was obtained from:

4. Research :

Whether involved in any Research Work?.....

If yes, Institution:.....

Project Name/ Title:.....

Date of Completion:.....

(If you have involved in more than one research work, please give the details in a separate sheet)

5. Publication/s: (list out your publications with title, name of the journal, year of publications etc.)

.....
.....

(Please annex separate sheet if this space is not sufficient)

6. Briefly describe the nature and responsibilities of your current position :

.....
.....

7. Career Aspirations : (Write in brief)

.....
.....

8. Funding: (Mode of financing your Master of Business Administration(MBA) Programme)

Private Sponsored Undecided

If sponsored, by whom?.....

9. Reasons for pursuing the MBA Programme :

(Briefly describe why you wish to enroll in the MBA Programme at the Faculty of Commerce and Management, Eastern University, Sri Lanka)

.....
.....
.....

10. List other information including your personal/career interests, which you may feel useful to the Admission Committee in the evaluation of your application :

.....
.....
.....

I certify that the above particulars given by me are true and accurate to the best of my knowledge and aware that misrepresentation in the application will cause rejection of application or revoking of acceptance for admission and that an incomplete application will be rejected.

Date:.....

Signature of the Applicant:.....

11. To be completed by Present Employer (if any)

This is to certify that Rev./Dr./Mr./Ms..... is employed as.....
..... with effect from.....

Recommended and forwarded

Name:..... Designation:.....

Date:..... Signature of Employer:.....

Duly completed application form along with relevant documents and two self addressed envelopes are to be sent on or before **17th of July 2018** by registered post to the following address:

Assistant Registrar,
Faculty of Commerce and Management,
Eastern University, Sri Lanka.
Vantharumoolai,
Chenkalady.