**STUDENT REGISTRATION FORM**

*This is a confidential document and to be used only for administrative purpose.*

**Economics Special Degree Programme – 2022/2023**

**Department of Economics & Statistics**

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| 1. **Registration No** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **NIC/Passport No** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Name in full** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Name with initial** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Date of Birth** | Year | | | | | |  | | | | | | | | | Month | | | | | | | | | | | |  | | | | Date | | | |  | | |
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| 1. **Ethnic** | Sinhalese | | | | | | | | | | | | | | | | |  | | | | Tamils | | | | | | | | | | | | | | |  | |
|  | Muslim | | | | | | | | | | | | | | | | |  | | | | Burger | | | | | | | | | | | | | | |  | |
|  | Others | | |  | | | | | | | Specify: | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Religion** | Buddhist | | | | | | | | |  | | | | R/Catholic | | | | | | | | | | | |  | | | | Christian | | | | | | |  | |
|  | Hindu | | | | | | | | |  | | | | Islam | | | | | | | | | | | |  | | | | Other | | | | | | |  | |
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| 1. **Gender** | Male | | | | | | |  | | | | | | | | | | | | | | | Female | | | | | | | | | | |  | | | | |
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| 1. **Civil Status** | Unmarried | | | | | |  | | | | | | | | | Married | | | | | | | | | | | |  | | | | Other | | | |  | | |
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| 1. **Residence** | Urban | | | | | | | |  | | | | Rural | | | | | | | | | | | | |  | | | Estate | | | | | | | |  | |
|  | Province | |  | | | | | | | | | | | | | | | | | | | | | | District | | | | | |  | | | | | | | |
|  | Divisional Secretariats | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Permanent Address** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Postal Address** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Accommodation** | Home |  | | | Hotel | | | | | | | | | |  | | | | Private accommodation | | | | | | | | | | | | | | | | | |  | |
|  | Address: *if hostel, write its name* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Contact details** | Phone | | | | | MOBILE | | | | | | | | | | | | | | | | | | | | | | HOME | | | | | | | | | | |
|  | Email | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Education** | **G.C.E. O/L** | | | | | | | | | | | Index No | | | | | | | | | | | |  | | | | | | | | | Year | | |  | | |
| **Qualification** | *Subject* | | | | | | | | | | | | | | | *Grade* | | | | | | *Subject* | | | | | | | | | | | | | | *Grade* | | |
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|  | **G.C.E. A/L** | | | | | | | | | | | Index No | | | | | | | | | |  | | | | | | | | | | | Year | | |  | | |
|  | *Subject* | | | | | | | | | | | | | | | *Grade* | | | | | | *Subject* | | | | | | | | | | | | | | *Grade* | | |
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|  | Z-Score | | | | |  | | | | | | | | | | | | | | | District | | | | | | | | |  | | | | | | | | |
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| 1. **Professional Qualifications** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Skills and abilities** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Hobbies and Recreations** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **Food Preferences** | Vegetarian | | | | | | | | |  | | | | | | | | | | Non-vegetarian | | | | | | | | | | | | | | | | | |  |
|  | Other | | | | | | | | |  | | | | | | | | | | *Chicken* | | | | | | | | | | | | | | | | | |  |
|  | *Specify:* | | | | | | | | | | | | | | | | | | | *Fish* | | | | | | | | | | | | | | | | | |  |
|  | *Egg* | | | | | | | | | | | | | | | | | |  |
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| 1. **Health related issues** | Long time Treatment | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Allergies | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Disabilities | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **In an emergency, to whom should be informed?** | Name | | | | | | | |  | | | | | | | | | | | | | | | | | | Relation | | | | | | | |  | | | |
| Address | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contact No | | | | | | | | MOBILE | | | | | | | | | | | | | | | | | | HOME | | | | | | | | | | | |
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| 1. **Signature** | I hereby declare that the details furnished above are true and correct to the best of my knowledge.  ………………………………………………………………………………………………. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |