	Name of Candidate:	
	Address:	
	Date:	
Registrar		
University of		
Dear Sir/Madam,		
Transc	ript of Academic F	<u>Records - 2015</u>
I have applied for admission to the pursue a program of study during th	•	of Agriculture, University of Peradeniya to .
Postgraduate Institute of Agricult	ture, P.O. Box 55, Old	academic record to the Deputy Registrar , d Galaha Road, Peradeniya, Sri Lanka to ter to my transcript when forwarding.
My particulars are as follows,		
1. Name in full	·	
2. Name of Degree		
3. Date of Admission	······	
4. Date of Final Examination	·	
A receipt in support of payment for	this transcript is enclos	eed.
		Yours faithfully,
		(Signature of Applicant)

This application along with the necessary payment should be sent by the applicant to the University/Institute where the applicant obtained the Degree.

POSTGRADUATE INSTITUTE OF AGRICULURE UNIVERSITY OF PERADENIYA REFEREE'S REPORT – 2015

SECTION 'A' (To be completed by the Candidate)

<u>REFEREE</u>		APPLICANT
Name		Full Name
Title		
Institution		
Mailing Address		Board of Study
		(Must be the same as that shown on application)
Proposed Postgradua	te Program (Circle one)	
M.Sc. M.B.A	M. Phil. Ph. D.	
I,	hereby waive my ri	ight of access to this reference report.
	(To be signed by applicant befo	(Signature of applicant) ore sending this form to the referee).

SECTION 'B' (To be completed by the Referee)

Please evaluate the applicant by placing a tick ($\sqrt{}$) after each characteristic that most nearly represents your opinion. Compare the applicant with a representative group of students qualified for graduate study whom you have known and who have had approximately the same amount of experience and training as the applicant. If you lack knowledge to make a definite rating, give your estimate of applicant's ability, by checking the last column.

	Below Average	Average	Good	Superior (Top 10%)	Inadequate Opportunity to Observe
 a. Ability to master academic work 					
b. Ability in oral expression in English					
c. Ability to written expression in English					
d. Motivation					
e. Emotional stability and maturity					
f. Self-reliance and independence					

a.		This student was enrolled in my class/es.
b.		I was this student's undergraduate advisor/ project or research advisor.
c.		While I have not taught or advised the applicant, I have known the person for years.
d.		I supervised or directed the work of the applicant foryears.
e.		I do not know this individual well enough to evaluate.
		please add any comments which will assist in our making ant should be admitted to our institute.
	Signature of Respondent	
	Date:	

Please enclose the confidential report in the envelope provided and sign after sealing it. <u>The signed envelope could be handed over to the applicant</u> who is required to mail it along with his/her application or you may mail your recommendation directly to the address given below to reach the Institute on or before 25-11-2014.

Director Postgraduate Institute of Agriculture P.O. Box 55 Old Galaha Road Peradeniya