



Lyceum Academy for Teacher Education

Address: No. 3/1, Raymond Road, Nugegoda, Sri Lanka | Tel: 2829744-5 / 2822387 Ext. 125

Email: lyceumacademynugegoda@gmail.com | Web: www.lyceumteachersacademy.org



DIPLOMA IN EARLY CHILDHOOD DEVELOPMENT EDUCATION

APPLICATION FORM FOR ENROLLMENT

Branch	
Receipt No.	

Weekday Weekend

Please annex the following to this application and hand over / post to the above mentioned address, for the attention of **The Academy Coordinator**:

- One photocopy of the Birth Certificate
- One photocopy of the G.C.E. O/L certificate
- One photocopy of the G.C.E. A/L certificate
- One Rs. 40 Stamp
- Three stamp sized photographs
- Three self-addressed, Rs. 10 stamped envelopes

Place stamp sized photo of applicant here

***Please note that programme fees cannot be refunded once payment has been made.**

1) PERSONAL DETAILS OF APPLICANT

a. Name with Initials	Rev. / Mr. / Mrs. / Ms. / Miss.										
b. Full Name (underline surname)											
c. Full Name to be written on certificate (Use block letters in each cage)											
d. Date of Birth	DD / MM / YYYY	Age		N.I.C. Number							

2) CONTACT DETAILS

a. Home Address											
b. Contact Numbers	Land Line:					Mobile:					
c. Email Address											
d. Name of Guardian											
e. Contact Numbers	Land Line:					Mobile:					

3) EDUCATIONAL QUALIFICATIONS AND WORK EXPERIENCE (IF ANY)

a.	GCE O/L Subjects sat for	Grade	Year	b.	GCE A/L Subjects sat for	Grade	Year
1.				1.			
2.				2.			
3.				3.			
4.				4.			
5.				c.	Any other educational qualifications	Results	Year
6.				1.			
7.				2.			
8.				3.			
9.				d.	Level of English proficiency	<input type="checkbox"/> Fair <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Excellent	
10.							

e. Teaching Experience	<input type="checkbox"/> No <input type="checkbox"/> Yes - please give details on the next page under "5) ADDITIONAL INFORMATION"
------------------------	---

4) DECLARATION: I declare that the particulars furnished on this application are true and accurate to the best of my knowledge.

Signature of Applicant: _____

Date: ___ / ___ / _____



Lyceum Academy for Teacher Education



Address: No. 3/1, Raymond Road, Nugegoda, Sri Lanka | **Tel:** 2829744-5 / 2822387 Ext. 125

Email: lyceumacademynugegoda@gmail.com | **Web:** www.lyceumteachersacademy.org

DIPLOMA IN EARLY CHILDHOOD DEVELOPMENT EDUCATION

APPLICATION FORM FOR ENROLLMENT

5) ADDITIONAL INFORMATION *(Please list details of teaching experience (if any) stating job title, name of Institution / School, duration and duties carried out.)*
