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 ENGLISH LANGUAGE
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

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

Place stamp sized photo of applicant here

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
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

b.	GCE A/L Subjects sat for	Grade	Year
1.			
2.			
3.			
4.			

c.	Any other educational qualifications	Results	Year
1.			
2.			
3.			

d.	Level of English proficiency	☐ Fair	☐ Very Good
		☐ Good	☐ Excellent

LYCEUM DNA

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:** ___ / ___ / _____