



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 TEACHING APPLICATION FORM FOR ENROLLMENT

Branch	
Receipt No.	
<input type="checkbox"/> Weekday <input type="checkbox"/> 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 National Identity Card (NIC)
 One photocopy of the G.C.E. O/L certificate Three stamp sized photographs
 One photocopy of the G.C.E. A/L certificate Three self-addressed, Rs. 45 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	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: _____

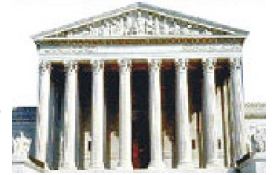
Date: ____ / ____ / ____



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