

**Faculty of Indigenous Medicine**  
**University of Colombo, Rajagiriya**

**Level I BAMS 2nd Semester(4th Sup) Exam-Jan-Feb 2024**

**EXAMINATION APPLICATION**

General Details [To be filled by the student.]		
1.	Name in Full	
2.	Name with Initials	
3.	Registration No.	
4.	Private Address	
5.	Contact No.	
6.	Have you registered for current academic year?	

Application Details [To be filled by the student.]			
	Code	Subject Name	Apply?
i	MS 1201	Ayurveda Muladharna (Fundamentals of Ayurveda) - II	<input type="checkbox"/>
ii	MS 1203	Padarta Vignana (Ontology)	<input type="checkbox"/>
iii	MS 1204	Sanskrit - II	<input type="checkbox"/>
iv	AS 1201	Shareera Rachana (Anatomy) - II	<input type="checkbox"/>
v	AS 1202	Shareera Kriya (Physiology) - II	<input type="checkbox"/>
vi	DV 1201	Dravyaguna Vignana (Ayurveda Pharmacology) - II	<input type="checkbox"/>
vii	EN 1000	English - I	<input type="checkbox"/>
viii			
ix			
x			
xi			
xii			

Student's Declaration [To be filled by the student.]	
I hereby certify that the particulars given above are true and correct. If particulars are found incorrect, I am aware that I will be penalized by cancelling whole or part (as the case may be) of the examination.	
Student's Signature: .....	Date: .....

**For Office Use Only**

No. of Attempts: .....

Examination Fees Paid: Yes / No / Not Applicable

Remarks: .....  
.....  
.....

Subject Clerk: .....

Date: .....

**Sectional Head's Approval**

Attendance: .....

Recommendation: All Subjects / None / Partial ( ..... Subjects Only)

Remarks: .....  
.....  
.....

Index No. ....

Sectional Head: .....

Date: .....

**Deputy Registrar's Approval**

Remarks: .....  
.....  
.....

Index No.: .....

Deputy Registrar: .....

Date: .....