CITY SCHOOL OF ARCHITECTURE

IN PARTNERSHIP WITH UNIVERSITY OF THE WEST OF ENGLAND, BRISTOL, UK



APPLICATION - CSA PARTII COURSE

ACADEMIC SESSION 2019 - 2020

(A) General Infor	<u>rmation</u>							
1. Full Name of Appl (In Block Letters, as appearing i Certificate <u>Underline Surname</u>	in Birth							
2. Permanent Addre	ess:							
Telephone Number:			-	Mobile N	umber:			
Fax Number:			-	E-Mail:				
3. Date of Birth:	Year:		_Month:		_Date:			
4. Birth- Certificate (Original &	English Tra	inslation a	ttached	ļ	YES	NO	
5. Gender:	Male]	Female]		
6. Civil Status:	Single]	Married				
7. Passport Number	r				(Please Attach	copy of your pass	sport)	
8. Blood Group:					_			
9. Name of Trainer F	Practice:							
Address:							_	
Supervising Charted Architect:								
Employed as Trainee since (Date / Year)								
Contact Details :	Tel-No:			-	Email:			
I hereby certify that the above information given are true and correct								
Signature & Seal of Supervising Architect								

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	Il completion of SLIA Part 1 Examination / CSA Diplo Full Time): (Please attach Photocopies of certificate) Month	ma in Arch	itectural
		-	
11. For Non CSA Stud attach Photocopies of	dents - Please state the Academic / Professional Quanf certificate)	lifications	(Please
Name of the Univers	sity or Higher Educational Institute: Year:		
Name of the Degree	/ Diploma Awarded: Year:		
Received SLIA Part 1	exception certification for foreign qualification:		
Yes Please attach	No the exception certification photocopies		
ij res, rieuse uttucii	the exception certification photocopies		
12. Any medical cond	dition you may suffer, which may be detrimental to p	ursuing a c	ourse
of studies at the tert	iary education level, if Yes please indicate	Yes	No
(B): Certification			
of			
do hereby apply to regist	er in the CSA Part II Course – Academic Session 2019 – 2020.		
responsibilities to the sch	nd regulations governing all matters related to the course and formool. I shall abide by the rules and regulations, which will beconstendance at the said CSA Course.		
knowledge. I am fully aw	t, all particulars furnished by me herein are true and accurate to are that any false statements or misrepresentation of facts enteration would result in disqualification and forfeiture of all rights	ered herein, i	f detected
I am aware that the App	lication Processing Fees paid by me is not refundable	1	
	Signature of Applicant]	Date
Affix Passport size			
Photograph	National Identity Card No/Passport No: Date of Issue:		
	Dute of issue.		
	1		
Signature Attested by	y:		
Justice of Peace or Con	norate Member of SIIA	Date	

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FOR OFFICE USE ONLY

PART II YEAR 3 (2021-2022)

FOR OFFICE USE OINET								
Duly Perfected Application and Documentary Evidence. Checked and certified by the Registrar, CSA								
Signature & B ubber Stamp: 2	Date							
The following payments were received by the Accounts Division :								
Processing fee of LKR.1000.00 for CSA Part II Academic Session 2019 -2020 would be charged from CSA Students.								
Processing fee of LKR.6000.00 for CSA Part II or Year 1 Academic Session 2019 -2020 would be charged from Non-CSA Students.								
Signature & R ubber Stamp:⊡								
Application in order – approved by the Head of School, City School of Architecture								
Signature & B ubber Stamp: 2	Date							
Application Received on:								
Interview Attended on								
Registration Date:								
ENROLLMENT	Accounts (Fee Paid)	Head of School	Registrar					
PART II YEAR 1 (2019-2020)	, 22 2.00/							
PART II YEAR 2 (2020-2021)								

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