Intermediate Level- FORM 'G' (with Industry Experiencel)

## **SRI LANKA INSTITUTE OF TOURISM & HOTEL MANAGEMENT** APPLICATION FOR ADMISSION TO THE INTERMEDIATE LEVEL

(A) PERSONAL PARTI	CULARS	<b>S</b> (IN CAPITAL LET	TERS)			
Professional Cookery						
Food & Beverage Operation	ns					
Front Office Operation						
Hotel Housekeeping			$\Box$			
(B) PERSONAL PARTI	CULARS	(IN CAPITAL LET	ERS)			
Full name:						
(As in NIC/Birth Certificate/Pa	assport, to	be filled in capital	letters and	underline	the surname)	
Permanent Address:						
E-mail Address:						
			Tel. No	.(Home)		
NIC No.			Tel. No	.(Mob)		
Passport No. (Foreign students only)			Sex	Male Female		
Date of Birth Date Month Year			Citizenship Sri Lankan O Others (Please Specify)			
Date Month	Year [		Citizen	iship		cify)
Date Month Month		TIONS	Citizen	iship		cify)
		TIONS G.C.E.	Citizen	iship		cify)
(C)EDUCATIONAL QUA G.C.E. (Ordinary Level) (1st Sitting)		G.C.E. (Ordinary Level)	Citizen	iship	Others (Please Specerics) G.C.E. (Advanced Level)	cify)
(C)EDUCATIONAL QUA G.C.E. (Ordinary Level) (1st Sitting) Year:		G.C.E. (Ordinary Level) Year:		Iship	Others (Please Spece G.C.E. (Advanced Level) Year:	cify)
(C)EDUCATIONAL QUA G.C.E. (Ordinary Level) (1st Sitting) Year: Index No:		G.C.E. (Ordinary Level) Year: Index No:		Iship Grade	Others (Please Spece G.C.E. (Advanced Level) Year: Index No:	cify)
(C)EDUCATIONAL QUA G.C.E. (Ordinary Level) (1st Sitting) Year:		G.C.E. (Ordinary Level) Year:			Others (Please Spece G.C.E. (Advanced Level) Year:	
(C)EDUCATIONAL QUA G.C.E. (Ordinary Level) (1st Sitting) Year: Index No:		G.C.E. (Ordinary Level) Year: Index No:			Others (Please Spece G.C.E. (Advanced Level) Year: Index No:	
(C)EDUCATIONAL QUA G.C.E. (Ordinary Level) (1st Sitting) Year: Index No:		G.C.E. (Ordinary Level) Year: Index No:			Others (Please Spece G.C.E. (Advanced Level) Year: Index No:	
(C)EDUCATIONAL QUA G.C.E. (Ordinary Level) (1st Sitting) Year: Index No:		G.C.E. (Ordinary Level) Year: Index No:			Others (Please Spece G.C.E. (Advanced Level) Year: Index No:	
(C)EDUCATIONAL QUA G.C.E. (Ordinary Level) (1st Sitting) Year: Index No:		G.C.E. (Ordinary Level) Year: Index No:			Others (Please Spece G.C.E. (Advanced Level) Year: Index No:	
(C)EDUCATIONAL QUA G.C.E. (Ordinary Level) (1st Sitting) Year: Index No:		G.C.E. (Ordinary Level) Year: Index No:			Others (Please Spece G.C.E. (Advanced Level) Year: Index No:	
(C)EDUCATIONAL QUA G.C.E. (Ordinary Level) (1st Sitting) Year: Index No:		G.C.E. (Ordinary Level) Year: Index No:			Others (Please Spece G.C.E. (Advanced Level) Year: Index No:	
(C)EDUCATIONAL QUA G.C.E. (Ordinary Level) (1st Sitting) Year: Index No:		G.C.E. (Ordinary Level) Year: Index No:			Others (Please Spece G.C.E. (Advanced Level) Year: Index No:	
(C)EDUCATIONAL QUA G.C.E. (Ordinary Level) (1st Sitting) Year: Index No:		G.C.E. (Ordinary Level) Year: Index No:			Others (Please Spece G.C.E. (Advanced Level) Year: Index No:	

course Title	University	Result Obtained	Year
INDUSTRIAL EX	PERIENCE		
Name of Hotel/s	Department	Period of Service	Position/s Held
ANY OTHER OU	AL IFICATIONS		
ANY OTHER QU	ALIFICATIONS		
) ANY OTHER QU	ALIFICATIONS		
ANY OTHER QUA	ALIFICATIONS		
) ANY OTHER QU	ALIFICATIONS		
) ANY OTHER QUA	ALIFICATIONS		
		why you wish to pursue this course	& future career plans
) ANY OTHER QUA	ALIFICATIONS please write in out more than 50 words w	/hy you wish to pursue this course	e & future career plans
		/hy you wish to pursue this course	e & future career plans
		hy you wish to pursue this course	e & future career plans
		/hy you wish to pursue this course	e & future career plans
		/hy you wish to pursue this course	e & future career plans
		/hy you wish to pursue this course	e & future career plans

Application should be sent directly to the registrar, Sri Lanka Institute of Tourism & Hotel Management No. 78, Galle Road, Colombo 03 Prior to the closing date. necessary Industrial Training should be completed and Industrial Training report to be received by the Registrar's Office No. 78, Galle Road, Colombo o3 one week prior to the closing date.

## (I) DECLARATION

I declare that the particular above are true to the best of my knowledge. I understand that should I make a false declaration, I shall be liable for disqualification or if already admitted, for expulsion from the course of study.

Date.....

Signature of Applicant.....