APPLICATION FORM INDUCTION PROGRAMME FOR ACADEMIC STAFF -2025 STAFF DEVELOPMENT CENTER, EASTERN UNIVERSITY, SRI LANKA

My personal de	taiis are as	s follows;								
Name in full: (Underline Last						•••••	•••••			
Name with initi	als:						• • • • • • • •			
Postal address:										
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E-mail:										
(An e-mail is <u>re</u>	quired for	the course	e)							
Fax no:					Tele No:					
Date of birth: Age										
Sex:	O									
Academic qual	ifications:									
DEGREI	Е	CLASS			YEAR AWARDED			ED UN	UNIVERSITY	
University occu	ipation:									
University:										
Department:								•••••		
Present designa	tion:						from (date):		
First appointme							- \	, ,		
11										
Duties and resp	onsibiliti 	ies in university:			r awar	ding		No. of		
	Degree	Course unit	1	2	3	4	PG	hours per year	No. of students in course	
Lectures								yeur		
Practical										
Tutorials										
Examination										
work	1	1	1	1	1	1	1	İ	1	

Other duties

I understand that;

- A. The course is run on **weekdays** (2-3 days per week, sometimes one working day for workshops by outside resource persons other than EUSL staff), and conducted in English medium.
- B. To pass the course, my portfolio has to be submitted and the course has to be completed within two years of the first course-workshop.
- C. I should have a minimum of **80% attendance** to qualify for the award of the certificate.
- D. I have to devote at least 6 hrs/ week on my own over the course duration for self-study.
- E. I have to devote **more time** for self-study in the last 6 months of the course, when my portfolio is being prepared and finalized.
- F. I shall be involved in some **teaching**, **student assessment and basic university administrative work during the course** which will form the basis of my course practical work.
- G. I agree to a selection interview if it will be held. I understand that the course fee is non refundable, that I will be struck off the course if I do not attend the workshop without a right to a course fee refund, and that course fees have to be paid before commencement of the course.

I am / am not* a permanent staff member (* strike off inappropriate word/s) I wish to enrol for this SDC induction course because (give one reason):						
Date:	Signature of applicant:					
given in A to G above, for applicant to	ove read and agree to provide the necessary facilities, as complete this course. Payment of the following fees is plicant is accepted as the course participant.					
	For staff from University, Campuses, HEI's etc. (verify with SDC in case if you have any doubts)					
Course Fee	Rs. 30,000.00					
Total	Rs. 30,000.00					
Date:	Head of Department (Signature & Official seal)					
Date:	Dean/ Director (Signature & Official seal)					
Date:	Vice Chancellor/ Rector					