

Kingston ID No:

(For office use only)

APPLICATION FOR ADMISSION TO AN UNDERGRADUATE PROGRAMME OF STUDY

[This form is **only** to be used for those applying through ESOF]

Please complete form in black ink / typeset as it may be need to be photocopied.

1 COURSE APPLYING FOR

PROGRAMME TITLE (please tick the course you are applying for)		
BEng Civil & Infrastructure Engineering	<input type="checkbox"/>	Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Sandwich <input type="checkbox"/> Top-Up <input checked="" type="checkbox"/>
BEng Mechanical Engineering	<input type="checkbox"/>	
BSc Computer Science (Network & Network Security)	<input type="checkbox"/>	
BSc Computer Science (Software Engineering)	<input checked="" type="checkbox"/>	
BSc Computer Science (Web & Mobile App Development)	<input type="checkbox"/>	
BSc Cyber Security & Digital Forensics	<input type="checkbox"/>	
BSc Multimedia Technology	<input type="checkbox"/>	
BSc Quantity Surveying	<input type="checkbox"/>	

2 PERSONAL DETAILS

PREFERRED TITLE: MR		GENDER: MAIE	
FAMILY NAME (Surname): UDUWARAGE DON			
FORENAMES (IN FULL): LAHIRU SANDARUWAN			
<i>E.g: Surname: Jayarathne</i> <i>Fornames: Weerasooriya Arachchige Saman Sudaraka</i> <i>Name that would appear on your Certificate: Weerasooriya Arachchige Saman Sudaraka Jayarathne</i>			
COUNTRY OF PERMANENT RESIDENCE: SRI LANKA			
DATE OF BIRTH: 20/12/1999		LEGAL NATIONALITY: SRILANKAN	
Please indicate any disabilities/special needs that may require special facilities or consideration. If none please tick box below. <input type="checkbox"/>		For Non-EU Applicants, state date of entry to live permanently in EU: DAY MONTH YEAR <input type="text"/> <input type="text"/> <input type="text"/>	
DO YOU HAVE A CRIMINAL CONVICTION: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			

3 ADDRESS(ES)

PERMANENT ADDRESS:	ADDRESS FOR CORRESPONDENCE (if different):
545/1, VITANAMULLA ,MARBODALA	545/1, VITANAMULLA ,MARBODALA
POSTCODE: 11114	POSTCODE: 11114
TELEPHONE NO: +94762783426	TELEPHONE NO: +94762783426
EMAIL ADDRESS: udlsandaruwan@gmail.com	
EMAIL ADDRESS OF ESOF CONTACT: E131113@esoft.acodemy	

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**4 EDUCATIONAL DETAILS
AND PROFESSIONAL
QUALIFICATIONS
ALREADY OBTAINED**

SCHOOL	SUBJECT	LEVEL (e.g. GCSE/AS)	GRADE	DATE
C.W.W KANNAGARA CENTRAL COLAGE	SINHALA ENGLISH INFORMATION TECHNOLOGY MATHS SCIENCE ART COMMERCE BUDDHISM HISTORY	O/L	B S C C B B B B C	2016

NAME OF COLLEGE / UNIVERSITY / PROFESSIONAL BODY	DATES ATTENDED	TITLE OF DEGREE OR QUALIFICATION	CLASS OR GRADE	DATE OF AWARD
LEVEL 5 PEARSON BTEC HND IN COMPUTING (SOFTWARE ENGINEERING)	2022	HIGHER NATIONAL DIPLOMA		
PEARSON DIPLOMA IN INFORMATION TECHNOLOGY	2022- 2023	DIPLOMA	MERIT	2023
PEARSON DIPLOMA IN ENGLISH	2022	DIPLOMA	MERIT	2022
BRITISH COUNCIL	2018	CERTIFICATE	B	2018
	2019	CERTIFICATE	B	2019
	2022	CERTIFICATE	B	2022
UNIVERSITY OF COLOMBO				
INSTITUTE OF HUMAN RESOURCE ADVANCEMENT (IHRA)	2019	DIPLOMA	MERIT	2019

**Examinations still to be
taken or qualifications to
be completed**

EXAMINING BODY	EXAMINATION	SUBJECTS	DATE OF EXAM

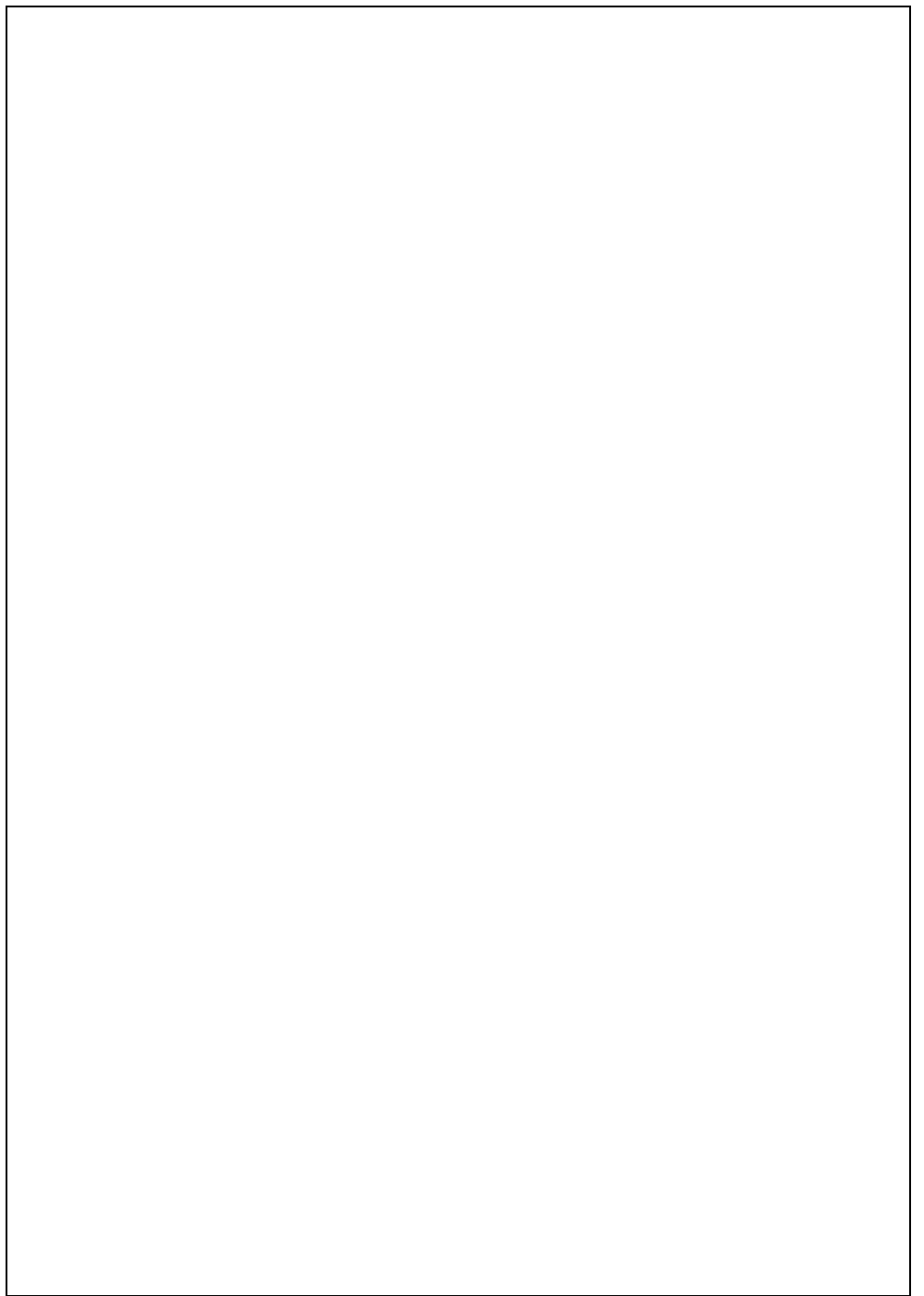
**5 CURRENT AND OTHER
RELEVANT EMPLOYMENT
OR EXPERIENCE**

EMPLOYER	DATES	POST AND BRIEF JOB DESCRIPTION (indicate if post is F/T or P/T)

Continued on the next page

6 FURTHER INFORMATION
(Please use this space to tell us why
you have chosen the course you
have and any further information
you feel will be of use or interest to
our admissions staff). Continue if
necessary on a separate sheet.

I COMPLETED MY HND COMPUTING (SOFTWARE ENGINEERING) AND FOR MY TOP UP I CHOSE KINGSTON UNIVERSITY BSC SOFTWARE ENGINEERING. THIS WAS CHOSEN WITH THE AIM OF DEVELOPING MY SKILLS AND ABILITIES AND OBTAINING A WORLD-RECOGNISED DEGREE QUALIFICATION



7 REFERENCE

Please give name and address of a referee who can provide us with details of your work and / or study experience.

Thanuja Dissanyake (Msc in IT - UK, MBA - UK, BEng in SE - UK)
Deputy Head of Academic Affairs
ESOFT Metro Campus
No. 36, Bauddhaloka Mawatha,
Gampaha.
0773171270

Nalini Basnayake
Center Manager & Lecturer ESOFT Metro Campus
No. 36, Bauddhaloka Mawatha
Gampaha.
0762324858

Ruchitha Wickramasinghe
Center Manager - Campus one
Product Brand Manager - ESOFT Metro Campus
Level 10 - One Galle Face Tower.
ruchitha.wickramasinghe@esoft.lk
0770039540

PLEASE FILL IN YOUR REFEREE'S NAME ON THE REFERENCE FORM PROVIDED AND PASS IT TO THEM TO COMPLETE AND RETURN DIRECTLY TO THE APPROPRIATE COURSE OFFICE

Continued on the next page

8 DECLARATION

I confirm that to the best of my knowledge, the information given on this form is correct. If accepted for the programme of study, I also agree to comply with all the University Regulations and Procedures.

Applicant's signature



Date: 20TH of AUGUST 2024

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DATE APPLICATION RECEIVED _____

Date letter sent: _____

REFERENCES RECEIVED _____

Interview Date / Time: _____

CANDIDATE INVITED FOR INTERVIEW (if applicable)

Offer Place ☐ Conditions (if any) _____

RESULT OF APPLICATION

Date applicant informed: _____

OUTCOME OF FEE ASSESSMENT (if required)

Home / EU ☐ Overseas ☐