

# APPLICATION FOR LEAVE

## NOTE:

- Please attach supporting documents for your application.
- Leave will not be granted during the examination periods. If the student is unable to sit for examinations due to medical reasons he/she should apply to the SAR/ Examinations on the form available at the Examinations Division.

<b>1. STUDENT DETAILS</b>														
1.1. Name	R.M.P.M. Rathnayaka													
1.2. Reg No	1	4	0	5	2	0	6	1.3. Tel No	+94 775718556					
1.4. E-Mail														
1.5. Course (tick/circle appropriate)	<input type="checkbox"/> BSc Engineering <input type="checkbox"/> BM <input type="checkbox"/> CH <input type="checkbox"/> CE <input checked="" type="checkbox"/> CS <input type="checkbox"/> ER <input type="checkbox"/> EE <input type="checkbox"/> EN <input type="checkbox"/> MT <input type="checkbox"/> ME <input type="checkbox"/> TT <input type="checkbox"/> MPR <input type="checkbox"/> BSc Transport & Logistics Management <input type="checkbox"/> BDes Fashion Design & Product Development													
1.6. Current Registration	BSc Engineering/ BSc TLM		S1	S2	S3	S4	S5	Ind. Trng.	S6	S7	<input checked="" type="checkbox"/> S8	Other		
	BDes FD&PD		Year 1		Year 2		Year 3		Year 4		Other			
<b>2. LEAVE DETAILS</b>														
2.1. Type of Leave (Tick appropriate)	<input type="checkbox"/> 1. Leave on Medical/ Compassionate/Official Representation Grounds <input type="checkbox"/> 2. Leave for Long Duration (maximum one academic year) <input checked="" type="checkbox"/> 3. Leave for Short Duration (maximum 15 working days per semester for BSc Eng or BSc TLM; maximum 12 working days per term for BDes)													
2.2. Reasons for Leave	To participate in a research conference.													
2.3. Duration	Start Date (ddmmyy)	End Date (ddmmyy)	Local/ Overseas		No of Working Days				No of Holidays/ Vacation Days					
	29/10/18	08/11/18	overseas		6				2					
<b>3. DECLARATION BY STUDENT</b>														
I hereby certify that														
1. I have reviewed my application and everything stated is true and correct to the best of my knowledge														
2. I understand, accept and agree that it is my responsibility to cover any academic activities missed during my period of leave.														
Signature								Date		17/09/2018				
<b>4. CERTIFICATION &amp; RECOMMENDATIONS</b>														
<b>4.1. Certification by relevant authorized person (for leave for official events only)</b>														
Recommended/ Not Recommended (please state reasons)														
Signature & Seal								Date						
<b>4.2. Recommendation by Semester Coordinator/Year Coordinator</b>														
Recommended/ Not Recommended (please state reasons)		Student is responsible for academic work												
Signature								Date		17/09/2018				
<b>4.3. Recommendation by Head of Department</b>														
Recommended/ Not Recommended (please state reasons)														
Signature & Seal								Date		17/09/2018				
<b>4.4. Certification by FAC Representative</b>														
Signature								Date		17/09/2018				
<b>4.5. Recommendation by Director/ Industrial Training (for leave requested during the industrial training placement)</b>														
Recommended/ Not Recommended (please state reasons)														
Signature & Seal								Date						

## UG DIVISION USE ONLY

Submitted to FAC / Returned to the Student / Returned to the Department on .....

Undergraduate Studies Division

18 SEP 2018

Faculty of Engineering  
University of Moratuwa





Rathnayaka Mudiyanseelage Prabod Manuranga  
University of Moratuwa  
Bandaranayake Mawatha  
Moratuwa 10400  
Sri Lanka

Friday 7 September 2018

Invitation letter for EMNLP 2018

Dear Rathnayaka Mudiyanseelage Prabod Manuranga,

It is with pleasure that we invite you to join us at **the** 2018 Conference on Empirical Methods in Natural Language Processing. This conference **will be** held in Brussels from October 31 to November 4, 2018.

We are glad to inform you that your paper has **been** accepted for presentation:

"Sentylic at IEST 2018: Gated Recurrent Neural **Network** and Capsule Network Based Approach for Implicit **Emotion** Detection"

We are looking forward to welcoming you in **Brussels**.

Please note that you are responsible for your own **registration** and other fees related to your participation.

Best regards,

**KU Leuven**  
Conference and Events office  
Oude Markt 13, box 5004  
3000 Leuven, Belgium  
congresbureau@kuleuven.be

Dominique De Brabanter, on behalf of the EMNLP 2018 local organizing committee

*KU Leuven, Conference and event organizer*