

Veterinary Council of Sri Lanka

(Established under the Veterinary Surgeons and Practitioners Act No.46 of 1956)

APPLICATION FOR QUALIFYING EXAMINATION TO OBTAIN POVISIONAL REGISTRATION

Affix a colour photograph of 35mm x 45mm taken within last six months

Name with Initials:	
Full Name:	
Date of Birth:	
Permanent Address:	······································
Address for Correspondence ;:	
Contact Number(s):	
E-mail Address :	
Professional Qualification :	
Effective Date :	
Name and Address of the Institute :	
SUBJECTS SELECTED FOR QUALIFYING EXAMINATION Veterinary Medicine	
Veterinary Surgery	
Veterinary Obstretics and Reproduction	
(Tick the subjects selected for the examination)	
 Documents to be attached: 1. Certified copy of the degree certificate 2. Certified copy of birth certificate 3. Payment receipt 	
I hereby declare that the information submitted above is true knowledge.	and accurate to the best of my
	Signature
Note: Examination fee for each subject is Rs 8 000 00 and should be	•

Note: Examination fee for <u>each</u> subject is Rs.8,000.00 and should be credited to the Veterinary Council Account number 0000031607 at Bank of Ceylon, Peradeniya.