For Repeat Students

INSTITUTE OF HUMAN RESOURCE ADVANCEMENT UNIVERSITY OF COLOMBO

(For office use only)
Index Number

Certificate / Diploma / Executive Diploma / Higher Diploma Repeat Examination

Name	of the Course	(
Semes (Please	ster write in block letters)	(
1.	Registration No in IHRA	(
2.	Index No	(
3.	Full Name	(English) (
		(Sinhala) (
Na	me denoted by initials	(English) (
		(Sinhala) (
		Mr		
4.	Gender	Ms		
5.	Postal Address	(
6.	Email Address	(
7. 1	Геlephone Numbers	Office		
		Mobile		
8.	National Identity Card No			
9.	Medium			
10.	Subjects and Subjects code to be taken at the examination			
11.	I certify that the above men examination.	tioned details are correct and I have properly registered for the above		
_				
Date:	:	Signature of the Candidate		

Please handover the duly filled hardcopy of the application	with payment receipts and board decision
letters on or before to the Examination Br	anch through Coordinator.
For office use	only
Application checked	
	Accepted / Not Accepted
Date:	Signature of Subject Clerk
	Attendance
The above named student has been permitted / not permitted	ed to sit the above- mentioned subjects at the
Examination in Certificate / Diploma / Executive Diploma / H	Higher Diploma
Date :	Coordinator

3 rd Trimester Examination of Executive Diploma in Tourism, Events and Hospitality Management No.04						
No	Subject	Date	Time			
	Finance Analysis for Tourism Project Operations and Market Analysis (ETEHM 1008)	16.12.2023	9.00 am - 12.00 pm			
2	Tour Guiding and Package Designing (ETEHM 1009)	17.12.2023	9.00 am - 12.00 pm			