**MASTER OF AGRICULTURE DEGREE PROGRAMME**

**FACULTY OF AGRICULTURE**

**RAJARATA UNIVERSITY OF SRI LANKA**

**Application for Comprehensive Examination**

1. Name in Full : …………………………………………………………………………………
2. Registration No : …………………………………………………………………………………
3. Academic Year : …………………………………………………………………………………
4. Mobile No : …………………………………………………………………………………
5. Email : …………………………………………………………………………………
6. Research Project Supervisors : 1. ………………………………………………...................................

2. ………………………………………………...................................

1. Final Grade Point Average : ………………………………………………………………………...

**CONDITIONS**

1. I agree the Board of Study may set the examination on a suitable date within 02 months of submitting of this form and by the time I will be ready to face the exam.
2. I have a maximum of three attempts to obtain a satisfactory grade at the comprehensive examination.
3. If I do not obtain a satisfactory (‘S’) grade at the third attempt of the comprehensive examination, the Board of Study reserves the right to recommend to award a postgraduate diploma.
4. I submit this form duly completed to the Postgraduate Unit of the Faculty of Agriculture, RUSL together with the bank receipt indicating the payment of comprehensive examination fee before prescribed date.
5. I have paid all remaining dues including the semester registration fees, semester examination fees, tuition fees, and other fees as prescribed.
6. If I fail to sit for the comprehensive exam on the date set by the Board of Study without providing any valid reason, it will be considered as the first attempt. In such cases, a rescheduling fee of Rs. 1,000.00 and the comprehensive examination fee of Rs. 7,500.00 should be paid again.
7. If I fail to sit for the comprehensive examination within the semester following the release of final GPA, all dues of the semester registrations, as prescribed in the current year student handbook, up to the date of application for comprehensive examination should be paid.
8. I understand that requests to postpone comprehensive examinations are entertained only under exceptional circumstances and such requests will not be accepted within three days ahead of a scheduled examination.

Signature of the Student: ……………………………………… Date: …………………

|  |
| --- |
| **FOR OFFICE USE ONLY**Results, payment records, and information given above by the candidate comply with the personal file, account details and results sheets. |
| ……………………………………………..Prepared by | ……………………………………………..Certified by Secretary to Board of Study |

**Instructions**

* Bank deposit slip confirming the deposit of Rs. 7,500.00 (comprehensive examination fee) to the account no. 008-1-001-4-8565998 (Faculty of Agriculture, RUSL) held at the Peoples’ Bank, Anuradhapura indicating the applicant’s name with initials and phone number.