## Faculty of Applied Sciences Wayamba University of Sri Lanka

## **RE- REGISTRATION FOR REPEAT EXAMINATIONS**

Reg. No

		Academic Year	
01. Name in Full	:		
02. Name with Initials	:		
03. Postal Address			
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04. Contact No	:		
05. Degree Programme	: B.Sc. (General/ Joint Major)		
06. Academic Year Last Renewed	·		
oo. Academic Fedi East Nellewed		••••	
07. No. of Year to be Renewed (In case of students who did not	:registered for the previous acad		
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08. Re - Registration Fee	:		·
Date:	Signature of Applicant:		