

## **Diploma in Capital Markets APPLICATION FORM**



Please fill the application form in BLOCK CAPITALS **PERSONAL DETAILS** Family Name: Title: Mr / Mrs / Ms First Name: Middle Name: Date of Birth: Nationality: Gender (M/F): NIC No: Address of Correspondence: Tel No: (land line) Mobile No: **Email Address: EDUCATION** Category I Registration Number: Year of Completion: **Certificate in Capital Markets (CCM)** Category II Year of Completion: Programme **Academic Qualification Category III** Year of Completion University Academic Programme **Professional Qualifications** 

has been omitted. I accept that Education & Training Division, or right to cancel my application ar	if I do not fully comply with The Securities & Exchant and shall have no claim again become the confidential p	e, complete and accurate and no information ith these requirements of the Capital Market age Commission of Sri Lanka shall have the inst them. I understand that this application property of the Capital Market Education & ed.
Signature		Date
<ul> <li>Copy of the CCM certification</li> <li>or/and</li> </ul>	nte / letter  fessional examination certifit  ficates should be certifie	
	FOR OFFICE USE (	ONLY
Documents Submitted	Payment Details	Educational Certificates
BOC receipt for		
SEC payment (Rs. 32,500 + VAT)		
CISI £ 132 bank draft		
Degree / professional, Educational		

**DECLARATION** 

certified copies

## Capital Market Education & Training Division Securities & Exchange Commission of Sri Lanka

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