

Capital Market Education and Training (CMET) Division Securities and Exchange Commission of Sri Lanka Level 28-29 Fast Tower World Trade Centre Echelon Square Colombo 01

Level 2	8-29, East Tower, World Trade Centre, Echelon Square, Colombo 01
Certificate in Capital Markets	
APPLICATION FORM	
Please fill the application form in BLOCK CAPITALS	
Medium: English Sinhala	
PERSONAL DETAILS	
Title: Mr / Mrs / Ms Surname:	
Other Names :	
Full Name with Initials:	
Date of Birth:	Nationality:
Gender (M/F):	NIC No:
Permanent Home Address:	Address of Correspondence:
Mobile No:	
Tel No : (land line)	Tel No:
Email Address:	Fax No:
EDUCATION	
Primary Education : Advanced Level Subject G	Grade
Subject	naue
OTHER ACADEMIC / PROFESSIONAL QUALIFICATION	

EMPLOYMENT	
If you are presently employed please state employer's name and nature of your work:	
(Note: your employer will not be contacted withou	ut vour permission)
(Note: your employer will not be contacted without	ac your permission)
DECLARATION I certify that the information given in this application information has been omitted. I accept that if I capital Market Education and Training Division of Sri Lanka shall have the right to cancel my application understand that this application and all suppoperty of Capital Market Education and Training released.	do not fully comply with these requirements the Securities and Exchange Commission of ation and shall have no claim against them. I orting documents become the confidential
Signature	Date
PAYMENT DETAILS	
Course Fee: Rs 30,000/-	
Cheques and cash should be deposited to Bank 9919753 and forward the original receipt along be drawn in favor of "Securities and Exchange Payee Only")	with the application form (All cheques should
DOCUMENTS TO BE FORWARDED ALONG WITH	THE COMPLETED APPLICATION FORM
 Original Payment Slip Copy of the National Identity Card or Valid Copy of GCE (A/L) Certificate 	Passport
Copies of all original Certificates and copy of NIC/Passport should be certified by either a "Justice of Peace", "Commissioner of Oaths" or "Notary Public".	
FOR OFFICE USE ONLY	
Payment Details:	Receipt No:
Signature:	Date:
For more information	

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