

2023 Second Semester Exam Notice

The Students of all Higher National Diploma programs are hereby informed to Apply for 2023 2nd semester Examination from 23/04/2025 to 23/05/2025

01.Repeat students should pay Rs:100/- per subject

02.Please submit a separate exam applications per attempt

03.Special Exams / Exam applications can be downloaded via
www.kegalle.sliate.ac.lk

- If there are special exam repeaters, they can apply during this period only for this semester.
- The duly filled exam application forms can be handed over to the institute during 9.30 a.m – 2.00 p.m from 23rd of April to 23rd May of 2025

NOTE: You should bring your red book for the submission exam application.



SRI LANKA INSTITUTE OF ADVANCED TECHNOLOGICAL EDUCATION
All Candidates are bound to act in conformity with the provision of the examination Act No: 25 of 168

APPLICATION FOR THE SEMESTER END EXAMINATION - ATI - Kegalle

Name of the Diploma Program : HNDA / HNDIT / HNDEN / HNDPM

Year : 2023 II Semester

Nature of course : Full Time / Part Time (Proper / Repeat / Medical / Assignment Only / Special exam)

01. Name with initials :

02. Name denoted by the initials:.....

03. Student Registration No :

04. Present Address:.....

05. Gender (Male / Female) Tele. No : ID No

06. i Index No :

ii Receipt No: for payment of Examination fees.....Penalty Charges

07. Specify subject to be taken at the examination.

Year requested to sit the exam : 1 2 3 4

S.NO	Subject Code & Subject	Examination type (please Tick)						
		I(SE)	I(NC)	DFR	I(CA)	AB	NE	Special
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

08. Indicate the attempt you are applying for.

1st Attempt

2nd Attempt

3rd Attempt

4th Attempt

Special

09. Index No: of the Previous Attempt :

10. If you are a transferred student

Previous ATI :

Course Transfer (FT / to PT):

Registration No. :

Previous Index No. :

Present Index No. :

DECLARATION OF APPLICANT.

I certify that the information forwarded above is true and correct.

Date :

Signature of Applicant :

(Please note that separate exam application needs to be submitted for each attempt)

Note : Please complete all items in this application from Incomplete applications will be rejected

RECOMMENDATION OF LECTURES

No	Subject Code & Subject	Percentage of Attendance	Recommendation of Lecturer	Signature
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Date :

RECOMMENDATION OF THE HEAD OF THE DIVION

Mr./Miss/Mrs. Attended
course as a Full Time / Part Time/ Day / Evening student.
His/her attendance exceeds Percent and I recommended/not recommended
him / her to sit the Examination in the English Medium.

Date :

.....
Signature Head Of Division
Seal

APPROVAL OF DIRECTOR

This application has all fulfilled all requirements and I approve his application to sit the examination.

Date :

.....
Signature Director Seal