CONFLICT OF INTEREST DECLARATION FORM

- To be submitted by the student -

(Should be obtained at the time of registration)

Name with	n initials:			
Registratio				
2. I have registere PGIS.	ed for the following	g the academic prog	gramme (Masters/M	Phil/PhD)at the
-		of my knowledge a	and belief that there Peradeniya .	are no any close
•		my knowledge and niversity of Perade	belief, the following niya.	g close relative(s)
me of the relative	Designation	Board of Study	Programme of Study	Relationship
Signature:			Date:	
	ACKNOWLEDGE	MENT OF THE DEC	LARATION FORM	
I am in receipt of	the above declarat	ion form signed by		
(Reg. no.:) of the PGI	S on	
AR/SAR/DR			 Date	