

**Application Form for German Recognition for Sri Lankan Nurses – Short Course through CERC of the OUSL**

**THE OPEN UNIVERSITY OF SRI LANKA**

**For Office use only**

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| --- | --- | --- | --- | --- | --- |
| Student Registration No: | Division Code | Course Code | Year | Student No | C |

**Section A: To be Completed by the Student:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. Name with Initials | Rev/Ms./ Mr. | | | |
| 1. Full Name |  | | | |
| 1. Permanent Address |  | | | |
| 1. Date of Birth   DD/MM/YY |  | 1. Gender | | Male/ Female |
| 1. NIC No: / Passport No: |  | | | |
| 1. Telephone Numbers | Residence: | Mobile: | | |
| 1. Nationality |  | 1. Currently Registered Student of OUSL | | Yes/ No |
| 1. Email Address |  | | | |
| 1. Occupation & Workplace(if any) |  | | | |
| 1. Contact Details of Workplace | Address: | | Tel: No: | |

**Declaration:**

By submitting this application, I declare that the information I have provided is accurate. While I am studying at the Open University of Sri Lanka, I agree to abide by the University’s rules and regulations, including those regarding academic integrity, personal conduct, and behavior.

………………………………………

Signature

……………………………

Date

**Section B: To be Completed by the OUSL Department/ Division**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name & Designation of OUSL Officer | |  | | |
| Officer’s Signature |  | | Date |  |