

## UNIVERSITY COLLEGE OF JAFFNA

### APPLICATION FOR EXIT AT NVQ LEVEL 5

*(Students should pass all the modules of Foundation, NVQ Level 5 and complete OJT VIVA to submit this form)*

#### I. Details of Student

- 01. Full Name (In block capitals):** .....
- 02. Registration Number:** JF/.....
- 03. Department:** .....
- 04. Postal Address:** .....
- 05. Contact Number:** Landline: ..... Mobile:.....
- 06. Email ID:** .....

#### II. Details of Results

Foundation	Grade	Modules of Level 5 Semester I	Grade	Modules of Level 5 Semester II	Grade

#### III. Details of On the Job Training (Phase I)

**07. Date of commencement of OJT:**..... **08. Date of Completion:** .....

**09. Where did you complete your OJT? / (Company /Department & Address):**

.....

**10. Date of OJT VIVA:**..... **Results:** .....

**11. Reason for Exit :** Got job placement ☐ For Higher Studies ☐ Other reason ☐

**12. Have you registered for Level 6:** Yes ☐ No ☐

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student

**IV. For official use only;**

1. I certify that Mr./Ms . ..... has completed all the modules of Foundation ,NVQ Level 5 and OJT VIVA and recommended/not recommended for the exit.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Head of Department

2. I recommend / not recommend Mr./Ms . ..... for the exit.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Head of Academics

3. I certify that Mr./Ms. .... has competed all the modules of Foundation , NVQ Level 5 and OJT recommended/not recommended for the Exit at Level 5.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Assistant Registrar

4. Recommended to submit the request at Board of Studies.

\_\_\_\_\_  
Date

\_\_\_\_\_  
CEO/Director

The above request was approved/ not approved by the BOS at its \_\_\_\_\_ meeting held on \_\_\_\_\_

The decision was conveyed to the student on \_\_\_\_\_.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Subject Clerk