SWAMY VIPULANANDA INSTITUTE OF AESTHETIC STUDIES, EASTERN UNIVERSITY, SRI LANKA

<u>NO CLAIM CERTIFICATE FOR STUDENTS</u>

Full Name of the Student :………………………………………………………………...……...................

Registration No. :……………………………….………..   Index No. :………………………………..

Address :……..

Contact No: …………………………………………

Course of Study   : **Bachelor of Fine Arts in** …………………………………………………………..………

Academic Year   : ……………………………….

…………………….…………………………..

Signature of the undergraduate

 Please report whether there are any dues, books, and equipments etc. that have to recover/ returned from the above student. Please indicate below whether **"Claim" or "No Claim"**.

Sgd.
Mr. S. Edward Reginold
Deputy Registrar,
Examinations & Student Admissions, SVIAS, EUSL

1.   <u>DEPARTMENT OF MUSIC, SVIAS</u>

Name of the Head	:………………………………	Claim	
Signature of the Head	:………………………………	No Claim	
Rubber Stamp	:		

2.   <u>DEPARTMENT OF DANCE AND DRAMA & THEATRE, SVIAS</u>

Name of the Head	:………………………………	Claim	
Signature of the Head	:………………………………	No Claim	
Rubber Stamp	:		

3.   <u>DEPARTMENT OF VISUAL & TECHNOLOGICAL ARTS, SVIAS</u>

Name of the Head	:………………………………	Claim	
Signature of the Head	:………………………………	No Claim	
Rubber Stamp	:		

4.   <u>LIBRARY, SVIAS</u>

Name of the Senior Assistant Librarian	:………………………………	Claim	
Signature of the Senior Assistant Librarian	:………………………………	No Claim	
Rubber Stamp	:		

5. **UNIT OF INFORMATION COMMUNICATION TECHNOLOGY, SVIAS**

    Name of the Coordinator   :……………………………

    Signature of the Coordinator   :……………………………

    Rubber Stamp   :

Claim	
No Claim	

6. **LANGUAGE LEARNING ZONE, SVIAS**

    Name of the Coordinator   :……………………………

    Signature of the Coordinator   :……………………………

    Rubber Stamp   :

Claim	
No Claim	

7. **PHYSICAL EDUCATION UNIT, SVIAS**

    Name of the In – Charge   :……………………………

    Signature of the In – Charge   :……………………………

    Rubber Stamp   :

Claim	
No Claim	

8. **CULTURAL BAND, SVIAS**

    Name of the Staff In – Charge   :……………………………

    Signature of the Staff In – Charge   :……………………………

    Rubber Stamp   :

Claim	
No Claim	

9. **STUDENT WELFARE, SVIAS**

    Name of the Assistant Registrar   :……………………………

    Signature of the Assistant Registrar :……………………………

    Rubber Stamp   :

Claim	
No Claim	

10. **HOSTEL (MALE / FEMALE), SVIAS**

    Name of the Sub warden   :……………………………

    Signature of the Sub warden   :……………………………

    Rubber Stamp   :

Claim	
No Claim	

Checked by:

Me. S. Edward Reginold
Deputy Registrar
Examinations & Student Admissions, SVIAS, EUSL