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

NO CLAIM CERTIFICATE FOR STUDENTS

Full Name of the Student :					
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, at the above student. Please indicate below whether "	- -	cover/ return	ed from		
 Sgd. Mr. S. Edward Reginold Deputy Registrar, Examinations & Student Admissions, SVIAS, EUSL DEPARTMENT OF MUSIC, SVIAS 					
Name of the Head	:	Claim			
Signature of the Head	:	No Claim			
Rubber Stamp	:				
2. DEPARTMENT OF DANCE AND DRAMA & THEATRE, SVIAS					
Name of the Head	:	Claim			
Signature of the Head	:	No Claim			
Rubber Stamp	:		1		
3. DEPARTMENT OF VISUAL & TECHNOLOG	CICAL ARTS SVIAS				
Name of the Head	:	Claim			
Signature of the Head	<u>:</u>	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		<u> </u>			

5.	UNIT OF INFORMATION COMMUNICATION TECHNOLOGY, SVIAS		
	Name of the Coordinator		Claim
	Signature of the Coordinator	:	No Claim
	Rubber Stamp	:	
6.	LANGUAGE LEARNING ZONE, SVIAS		
	Name of the Coordinator	:	Claim
	Signature of the Coordinator	:	No Claim
	Rubber Stamp	:	
7.	PHYSICAL EDUCATION UNIT, SVIAS		
	Name of the In - Charge	:	Claim
	Signature of the In – Charge	:	No Claim
	Rubber Stamp	:	
8.	CULTURAL BAND, SVIAS		
	Name of the Staff In - Charge	:	Claim
	Signature of the Staff In - Charge	:	No Claim
	Rubber Stamp	:	
9.	STUDENT WELFARE, SVIAS		
	Name of the Assistant Registrar	:	Claim
	Signature of the Assistant Registrar	:	No Claim
	Rubber Stamp	:	
Ch	ecked by:		

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