



Application for Sri Lankan Biology Olympiad - 2009

Issued by Institute of Biology, Sri Lanka



Name of Applicant: _____

Name with initials : _____

National Identity Card Number: _____

Address : _____

Telephone number: _____

E - mail address (if available): _____

Gender : Male / Female

Date of Birth: _____ Year _____ Month _____ Day

Name and Address of the school : _____

Medium chosen for examination: Sinhala / English / Tamil

Preferred Examination Center/ University

_____ Colombo/ Kelaniya/ Sri Jayewardenepura

(based on address candidate will be given one of these centers)

_____ Peradeniya

_____ Ruhuna

_____ Jaffna

_____ Eastern

Payment details of People's Bank: Branch: _____ Date: _____

I state that the above particulars are true and correct.

Signature of the applicant

I certify that the candidate is a student of _____
(name of the school) and sitting for A/L Examination in 2009/ 2010.

Signature and Official stamp of The Principal

Pay Rs 400 to Peoples Bank, Institute of Biology account number 086-1-001-4-1191763 of
Thimbiriyasaya Branch and attach the Payment slip to this Application and send to
SLBO Coordinator, Institute of Biology, SLAAS Office, 120/10, Vidya Mawatha, Colombo 7