





Application Form

Issued by Institute of Biology, Sri Lanka

Name of Applicant :
Name with Initials :
National Identity Card No :
Address :
Mobile Phone No :
E-mail (if available) :
Male : Female : Date of Birth : DDMMYYYY
Name and Address of the School :
Medium chosen for examination: Sinhala English Tamil
Preferred Examination Center/ University
Colombo/ Sri Jayewardenepura (based on address candidate will be given one of these centers)
Peradeniya Ruhuna
Jaffna Eastern

I state that the above particulars are true and correct. I confirm that I abide by the rules and regulations of the competition.

Signature of the applicant Date	
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Pay Rs. 800.00 to Peoples Bank, Institute of Biology account number 086-1-001-4-1191763 and attach the Payment slip to this Application and send to

SLBO Coordinator, Institute of Biology, SLAAS Office, 120/10, Vidya Mawatha, Colombo 7. www.iobsl.org