

## Department of Sports Science Faculty of Applied Sciences University of Sri Jayewardenepura

## **Advanced Diploma in Sports Science and Management**

## **Approval from the Head of the Institute**

Coordinator,
Advanced Diploma in Sports Science and Management,
Department of Sports Science,
Faculty of Applied Sciences,
University of Sri Jayewardenepura,
Gangodawila,
Nugegoda.

I hereby certify Mr./ Ms	
(Applicant's name with initials) is an employee of	the
(Name of the institute) wor	king as a
(Designation) from	(Appointment date) on
permanent/temporary/contract (Delete the inapp	propriate word) basis. I will give my approval
for him/her to follow the Advanced Diploma in Sp	orts Science and Management in your
institution in the event of being selected.	
	Date :
Signature of the Head	
(confirm with official seal)	
Name of the Head:	
Designation:	
Name of the Institute:	