



## 100 LEVEL - December / January – 2026/2027

**Incomplete forms will be rejected.**

|                        |  |
|------------------------|--|
| <b>Office use only</b> |  |
| Application Entered By |  |
| Application Checked By |  |

01. Registration No AE/BA/...../.....
02. National ID No
03. Title: - Rev. ☐ Mr. ☐ Ms. ☐ (Please ✓ tick off the relevant cage)
04. Name with Initials:-

If there is any discrepancy in the name provided above, please indicate the correct name in **CAPITAL LETTERS** in the space provided. **(The name should be as per the Birth Certificate)**

[illegible]

- 05. Name in Full:-**

If there is any discrepancy in the name provided above, please indicate the correct name in **CAPITAL LETTERS** in the space provided. **(The name should match the Birth Certificate.)**

[illegible]

- 06. Particulars of Examination for which entry is sought:-**

|                      |          |                    |                      |
|----------------------|----------|--------------------|----------------------|
| <b>FNDE Subjects</b> |          | <b>Course Code</b> | <b>SUPE Subjects</b> |
|                      | <b>1</b> |                    |                      |
|                      | <b>2</b> |                    |                      |
|                      | <b>3</b> |                    |                      |
| <b>Course Code</b>   | <b>1</b> |                    |                      |
|                      |          |                    |                      |
|                      |          |                    |                      |
| <b>Core Subjects</b> | <b>1</b> | <b>Course Code</b> |                      |
|                      | <b>2</b> |                    |                      |
|                      | <b>3</b> |                    |                      |
|                      | <b>4</b> |                    |                      |
|                      | <b>5</b> |                    |                      |
|                      | <b>6</b> |                    |                      |

- 07. (a) Contact Number :- (Compulsory)**

\_\_\_\_\_

- (b) Email Address:- (Compulsory)**

|  |
|--|
|  |
|--|

- (c) WhatsApp Number:(Compulsory)**

|  |  |
|--|--|
|  |  |
|  |  |

08. Examination will be held at CDCE / University of Peradeniya only.

09

**EXAMINATION FEES - 100 LEVEL**

| Payment                                                                                                                                               | Amount         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| • Students who are applying for 100 level examination for the first time (With Renewal fee)<br>(If already paid Rs. 10,000/= during the registration) | Rs. 27, 000.00 |

**Repeat Student payment structure as follows :**

|                                                                                                                                  |             |
|----------------------------------------------------------------------------------------------------------------------------------|-------------|
| • Annual registration renewal fee<br><i>(Not necessary to pay, if paid for the 200 level &amp; 300 level examination – 2026)</i> | Rs. 3000.00 |
| • Examination Fee (per subject )                                                                                                 | Rs. 1250.00 |
| • Application processing Fee (mandatory for all levels)                                                                          | Rs. 1500.00 |

Payable at any Branch of People's Bank :-

**Bank Account Details :**

**Bank** : People's Bank Account

**Branch** : Peradeniya:-

**Current Account No.** : **057-1-001-4-1338036**

*(Payable to any branch of the People's bank)*

I      Date of payment      Date      Month      Year      II      Bank Branch

|  |  |  |
|--|--|--|
|  |  |  |
|--|--|--|



***Please paste the cash deposit slip (original only) here***

I certify that I have correctly entered all the particulars relevant to the application. I am aware that with incomplete, false information and late applications will be rejected.



Date



Signature of the Applicant

**For Office Use only**

| Payment Remarks | Payment Arrears Amount |
|-----------------|------------------------|
|                 |                        |
| Other Remarks   |                        |
|                 |                        |

**\*Print this application in both side (A4 size) of the paper.**

**Closing Date of the Application : 2<sup>nd</sup> October 2026**