

The Open University of Sri Lanka

Form of Recommendation for Appointing Consultant/Visiting Academic/ Unit Author/ Editor/ Translator/ Project Assistant/ Visiting Technician

Department		Centre	
Post			
Date of Appointment			
Date of Termination			
Total Commitment			

Justification for the Appointment			
Programme of Study			
No. of Courses and Course Codes			
Estimated No. of Students for above courses			
Work Load description including no. of sessions/ Consultancies / hours			
Are there any other resource persons involved for above courses	Yes/No	If Yes, Number	
Any other reasons for the appointment			

Name of the Applicant			
Present employment, if any			
Postal address and Telephone Numbers	Private	Official	
Qualifications			
Recommended by the Head of the Department	Signature:..... Date:		
Recommended by the Dean of the Faculty	Signature:..... Date:		
Approved by the Vice - Chancellor	Signature:..... Date:		