

**THE OPEN UNIVERSITY OF SRI LANKA**  
**FACULTY OF HEALTH SCIENCES**  
**Application for Evaluation of Qualifications for Exemptions**

**IMPORTANT**

The following documents must be attached to the application form.

- a) Certified copies of all Educational / Professional qualifications.
- b) Certified copies of the syllabus of each subject to be evaluated.
- c) Handbook of the institution from which the qualification has been obtained (If available).
- d) Certified English translations if the originals are in a foreign language.

**BMLS Honors, BPharm Honors & BSc Honors in Psychology Students:**

**For consideration in the Academic Year 2023/2024, duly filled application form supported by the required documents should be reached on or before 20<sup>th</sup> October 2023 to:**

Head/ Dept. of Medical Laboratory Sciences, Head/ Dept. of Pharmacy, Head/ Department of Psychology & Counselling, The Open University of Sri Lanka, Nawala, Nugegoda.

Please forward the scanned originals and the application form to the relevant Heads of the Departments via Email to : Head/MLS ( [hdmedilab@ou.ac.lk](mailto:hdmedilab@ou.ac.lk) ), Head/Pharmacy ( [hdpharma@ou.ac.lk](mailto:hdpharma@ou.ac.lk) )  
Head /Psy. & Coun. ( [hdpcoun@ou.ac.lk](mailto:hdpcoun@ou.ac.lk) )

*INCOMPLETE / LATE APPLICATIONS WILL NOT BE ENTERTAINED.*

- 1. Programme : .....
- 2. Name of Applicant: .....
- 3. Registration No. (for Re- registrants) / NIC (New Registrants): .....
- 4. Contact Address .....
- 5. Telephone: Home ..... Office..... Mobile:.....
- 6. Email: .....
- 7. Courses in the OUSL programmes from which exemptions are requested by Applicant. Write the relevant codes, Level- wise as indicated in Programme Guide/Guidebook.  

Level: .....	Level: .....	Level: .....	Level: .....
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- 8. Particulars of the course / programme, followed by the Applicant, on which exemptions are requested. (Attach additional sheets if space is insufficient).  
Title of the course / programme : .....

Name & Address of the Institution where the course was followed:

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Duration of the course (No. of years / months): .....

Date of qualification: .....

Whether the course is full-time / part-time? .....

Details of the curriculum of the course / programme followed:

- (I) Detailed syllabus (attach documents certified by relevant authorities).
- (II) List the Laboratory experiments done in each subject (Use separate sheet / s).
- (III) Give below details of hours spent on Lectures, Practical, Field work, etc.

Subject	Weightage	Time Spend (Hours)			
		Lectures	Tutorial	Lab Work	Training

Give details of results obtained and evaluation criteria (details of grades, details of assessment, and requirement for the award of qualification): attach results sheets certified by relevant authorities.

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Any other information that may be useful for the evaluation of your qualifications:

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Signature of the Applicant:..... Date:.....