

Inter-Faculty Championship - 2025

Department of Physical Education

University of Colombo

Sport : **Volleyball**

☐

Men

☐

Women

Faculty/ Institute : -.....

Date : -.....

ENTRY FORM

	Name with Initials	Registration Number	Signature
01.			
02.			
03.			
04.			
05.			
06.			
07.			
08.			
09.			
10.			
11.			
12.			
13.			
14.			

Name of the team captain: -.....

.....
Signature

Contact No : -.....

I hereby certify the above mentioned students are 1st year internal students of the above mentioned Faculty/ Institute.

.....
Instructor /PE (Faculty Representative)

.....
Signature of Dean / Director / AR

Stamp

Contact: - Mr. Ajantha Dahanayake (Instructor in Physical Education) - 071 2950210