

Annexure 1

Application for Reimbursement of CIPM PhD Grant

(Should be submitted within the first quarter of the succeeding year, after completion of the doctoral degree)

| Basic Information of the Member | | | | | |
|---------------------------------|---|--|--|--|--|
| 1 | Name | | | | |
| 2 | NIC Number | | | | |
| 3 | Class of Membership | Date of Enrolment | | | |
| 4 | Email Address | Contact No. | | | |
| Deta | nils of the Doctoral Degree | | | | |
| 1 | Title of the PhD Study | | | | |
| | | | | | |
| | | | | | |
| 2 | University/ Institution | | | | |
| 3 | Date of registration to the degree | | | | |
| 4 | Effective date of the degree | | | | |
| 5 | Full amount spent for PhD including | course fee | | | |
| Cont | Contribution to CIPM (Mention your contribution to CIPM in brief) | | | | |
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| Ann | | d all the required documents using the checklist below) | | | |
| | | / letter of certificate with the effective date | | | |
| | Evidence on contributions made | • | | | |
| | Original payment receipts | show funding sources of the PhD | | | |
| | Original payment receipts | | | | |
| I, the | e undersigned, hereby make applicati | ion for Reimbursement of PhD Grant from the Chartered Institute | | | |
| of Pe | ersonnel Management, Sri Lanka (Inc | c.) and confirm that the information given above is correct to the | | | |
| best | of my knowledge. | | | | |
| | | | | | |
| | | | | | |
| | Date | Signature | | | |



For office use only

| 1 | Recommendation of the Standing Committee on CIPM Applied Research and Knowledge Centre | |
|---|--|---------|
| | Comments | |
| | | |
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| | | |
| | | |
| | Signature | |
| | Date | |
| | | |
| 2 | Approval of the CIPM | Council |
| 2 | Approval of the CIPM (| Council |
| 2 | | Council |