

**THE DIRECTORATE OF MERCHANT SHIPPING  
GOVERNMENT OF SRI LANKA  
EXAMINATION CENTRE**

APL No. .... D/E .....

**APPLICATION FORM FOR REPEATING CANDIDATES**

**EXAMINATION FOR A CERTIFICATE OF  
COMPETENCY AS  
.....**

**NOTE :** Examinations will be conducted in accordance with the Merchant Shipping  
(Deck and Marine Engineer Officers' Certificate of competency Examinations)  
Regulations 1998 published in Gazette Extraordinary No.1036/21 of 17 th July 1998

**1 PARTICULARS OF THE APPLICANT**

Prefix  
Mr. / Mrs. / Ms.

CDC No.

Surname

Other Name(s) in full

**2 DETAILS OF PREVIOUS ATTEMPT**

INDEX NUMBER

DATE APPEARED

**3 NEXT ATTEMPT PLANNED**

MONTH APPEARING

**4 REAPPEARING FOR WHICH  
SUBJECTS**

- 1.....
- 2.....
- 3.....
- 4.....

5	PAYMENT DETAILS
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MONEY ORDER NO.....
RECEIPT & DATE .....

**Declaration :**

I declare that the information provided to you in my initial application remain unchange  
Also I undertake to update you of any change of status immediately .

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\_\_\_\_\_

Signature

Date