Coordinator- FIT Programme,

e-Learning Centre,
University of Colombo School of Computing,
No. 35, Reid Avenue,
Colombo 07,

From: ..<Name with initials>…………………...…..,

…………<Address line 1>………………………….,

…………<Address line 2>………………………….,

Date: \_\_/\_\_/\_\_\_\_

**Request to schedule my FIT eTest examination online**

Dear Madam,

My details are as follows.

|  |  |
| --- | --- |
| **Full Name** |  |
|   |   |
| **FIT Registration Number**  |  |   | **Contact Number** |   |

**I would like to** face the FIT eTest exam online from my home and **I agree to** bear all the issues related to power cuts, costs, and technical failures on my side and sit for the examination on a date and time given by the eLC, UCSC.

I have attached the exam payment voucher/s to this letter.

……………………………………………… ………………………………………………….

Date Signature