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| --- | --- |
| *To be filled by the author/s and participants*  | **DEMO FINAL** **TEAM MEMBERS** |
| **Corresponding Team member details** |
| Name of student with title |  |
| UOM Student ID:  |  |
| Department |  |
| Address  |  |
| E mail address |  |
| Mobile phone number  |  |
|  |  |
| **Team member details** |
| Name of student with title |  |
| UOM Student ID:  |  |
| Department |  |
| E mail address |  |
| Mobile phone number  |  |
|  |  |
| Name of student with title |  |
| UOM Student ID:  |  |
| Department |  |
| E mail address |  |
| Mobile phone number  |  |
| Name of student with title |  |
|  |  |
| Pls add more rows for the other team members |  |
|  |  |
| **Demo ID No.: DE\_** |
|  |  |
| **Category of theme or sub-theme of your Demo:** Usage of space and human interaction, Professional space and … etc.  |
|  |  |
| **Selected Product :** Real eastate, paint…etc |
|  |  |
| **If any members appling for ‘Outstanding contributor of FARU 2019 award’**: Yes/ No |
| If yes, provide the name of member |  |
|  |  |
| **Title of Project Proposal Demo** |
| Submitted title  |  |
| If any changes add here |  |
| **Following to be filled by the FARU Office**  |
| **Demo ID** |  |

Please return the completed Application form to faru@uom.lk Payments can be sent after the notification of abstract acceptance

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