

Application Form

ALUMNI ASSOCIATION OF NSW SCHOLASHIP, UNIVERSITY OF COLOMBO

PART "A"

1. (a) Name of Applicant (with initials) :
- (b) Names denoted by Initials:
2. Male / Female : Date of Birth :
3. (i) Whether Sri Lankan Citizen or not :
- (ii) Nationality :
- (iii) Religion :
4. National Identity Card No :
5. Permanent Address :
6. Contact Details : Residence : Mobile :
- E-mail :
7. Profession / Occupation if any of applicant and Monthly income :
.....
8. Name and address of Parent / Guardian :
.....
.....

PART "B"

9. University and Academic Year which the applicant gained admission :
.....
10. Student Registration No :
11. (i) Faculty :
- (ii) Academic Year :
- (iii) Course of Study :
- (iv) Subjects offered :
.....
.....
12. District from which the applicant gained admission to University :

Part "C"

13. Short distance in kilometers from your permanent residence to your university :
(01 Mile = 1.6 Km)

14. Details of GCE (A/L) Examination:

(i) Index No.:.....

(ii) Results

Subjects	Grades

(iii) "Z" Score :

(iv) Whether the "Z" score was obtained at your First/Second or Third attempt.
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15. Details of GCE (O/L) Examination :

(i) Index No. : Year :

(ii) Results

Subjects	Grades

16. Family Details :

(i) Details of brothers and sisters who are still attending schools :

Name	Date of Birth	Name of School

(ii) Details of brothers and sisters who are studying at any University/ Campus or any other Higher Educational Institutes :

Name	Name of Higher Educational Institute and Course	Year of Study

17. Income Details

(i) Income status of Father/Mother/ Guardian (Certified documents should be attached)

Name	Relationship to the Applicant	Occupation	Name of the Employer	Annual Income (Monthly Gross Salary x 12)
	Father			
	Mother			
	Guardian			

- (ii) Income derived by applicant or his/her Father/Mother/Guardian from lands/business premises/houses/business undertaking etc.

Name of Owner	Relationship to the Applicant	Nature of Asset Business Undertaking	Annual Income (Monthly Gross Salary x 12)

18. Particulars of assistance received by the applicant from the Government/ Local Government Institutions/Universities, Loans/Scholarships/Bursaries etc.

Type of Assistance (Loans, Bursaries, Scholarships etc.)	Name of Institution Establishment Granting such assistance	Amount received per year

19. State your special reasons, if any, as to why you feel you deserve to be selected for this Scholarship:

.....

I, hereby declare that all the foregoing information given by me are true and accurate to the best of my knowledge and if any of the statements are found to be untrue or incorrect, the University of Colombo is entitled to reject my application before the award and/or in the event of any breach of the rules or terms and conditions governing this scholarship, the University of Colombo will terminate the award after the granting or be subject to action in whatever way it deems appropriate.

Date :

.....

Signature of Applicant

Part " D"

I certify that Rev./Mr./Miss./Mrs.....
is a student attached to this University and that his /her conduct and progress in studies is
satisfactory/ unsatisfactory.

Date:

.....

Signature

Deputy Registrar/Snr. Asst. Registrar

Asst. Registrar Faculty

The particulars given by this applicant in relation to his /her citizenship, educational district,
University education, marks obtained GCE O/L, A/L as given in item no:9,10,11, 12,14 & 15 in
the application are true and correct according to the records available at the examination
branch.

Date:

.....

Signature

Deputy Registrar/Examinations branch

This applicant does not receive any financial assistance from the government /any institution
or the University.

Date:

.....

Signature

Asst. Registrar/Student & Staff Affairs