

University of Jaffna – Sri Lanka

Application for Endowments, Scholarship, Prizes, Awards & Bursary

Part I

1. Name of Scholarship:
2. Full Name :.....
3. Address :
 - i) Permanent:.....
 - ii) Temporary:.....
4. Telephone No :.....
5. Year of university admission & current academic year:
6. Student registration number :
7. a) Faculty :.....
b) Course :.....
8. Gender : Male / Female
9. Date of Birth : year.....month.....day.....
10. School attended:.....
.....
11. Monthly expenditure with details:
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.....
.....

Part II

12. Family details:
 - a) Number of unmarried sisters / brothers:
 - b) Give the details of school going brothers / sisters:

Name	Date of Birth	School	Year of Study

c) Details of brothers or sisters following courses in University/Campus/Higher Institution details:

Name	Name of institution	Academic year & Reg.No	Course	Financial support

d) Give the details of brothers or sisters occupation (If they are supporting you or not):

Name	Age	Relationship	Occupation	Monthly Income	Working Place

e) Parental details: (If retired write the past occupation):

Name	Age	Relationship	Occupation/ Designation	Annual Income	Working Place

Details, if Father/Mother not living (Death certificate should be attached):

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f) Any other source of income:

Name	Relationship / Organization	Amount

13. Details of financial assistance receiving from University or any other government Organization (Mahapola/ Bursary/ AMAF/ Unifund/ Alumni etc):

Name of financial assistance	Name of organization	Amount receiving annually

14. Reasons for requesting financial assistance:

.....

I certify that the above details given by me are true and correct.

.....
 Date Signature

Signature of the parent (If diseased both get the signature from Guardian).

.....
 Date Parent / Guardian

a) Whether it is needed/not:

Certification of the MSU President

This is to certify that Mr/Mrs/Miss.....is a financial needy student.

.....
 Date MSU President

b) Recommendation of Senior Treasurer

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Date

.....
Senior Treasurer

c) Certification of the Grama Niladhari

This is to certify that the parental income and other details given by Mr/Mrs/Miss is true and correct according to the details available at my office.

.....
Date

.....
Grama Niladhari
Official Rubber Stamp

d) This is to certify that Mr/Mrs/Miss has been studying at the Faculty of Medicine, University of Jaffna at present he/she is in 1st/2nd/3rd/4th/5th year and he/she has done/not done the renewal of registration for this year.

.....
Date

.....
Dean/ Assistant Registrar
Official Rubber Stamp

e) Source of Scholarship/ Bursaries:

f) Recommended/ Not Recommended

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Chairman/ Scholarship, Prizes and Awards Committee.

