



**Application form for Rajatha Rashmi scholarship
Arts Circle, Faculty of Medical Sciences,
University of Sri Jayewardenepura**



SECTION 1: Personal information

- I. MED No: -.....
- II. FMS/R/ No:-.....
- III. Academic year of admission to university: -.....
- IV. Name with initials:- Mr./Miss./Mrs.....
- V. Full name: -.....
- VI. Permanent Address: -.....
.....
.....
- VII. Current address:-.....
.....
.....
- VIII. Contact telephone / mobile no: -.....
- IX. District of permanent address: -.....
- X. Number of school-going brothers / sisters who are 19 years or under 19 years: -
.....

(Please attach certified photocopy of their birth certificate/s.)

XI. Number of Brothers / sisters studying in any university / higher education institute: -

XII. Other scholarships received with amounts and duration:

Scholarship name	Total amount or monthly amount	Duration of scholarship

SECTION 2: Financial details

Details of Father:-

- i. Whether living or deceased: -..... (If deceased death certificate should be attached)
- ii. Father’s employment (if deceased employment before death. If retired employment before pension:

 (If retired pension certificate should be attached.)
- iii. Monthly income from employment / pension (Certified salary sheet for the immediately previous month should be attached):-
 Rs.....
- iv. Annual income from all other sources: - Rs.....

Details of Mother:-

- i. Whether living or deceased: -..... (If deceased death certificate should be attached)
- ii. Mother’s employment (if deceased employment before death. If retired employment before pension:

 (If retired pension certificate should be attached.)
- iii. Monthly income from employment / pension (Certified salary sheet for the immediately previous month should be attached):-
 Rs.....
- iv. Annual income from all other sources: - Rs.....

Total Monthly income of Parents (In words and numbers)

Rs.....

Financial commitments of the applicant or the applicant's parents in terms of loans, mortgages etc.

LOAN/MORTGAGE PURPOSE	FULL AMOUNT TAKEN ON LOAN	TIME PERIOD IN WHICH TO FINISH PAYING LOAN	MONTHLY INSTALMENT	LOAN AMOUNT REMAINING TO PAY AS OF APPLICATION DATE

Date:

Signature of applicant.....

Name of Grama Niladhari:

Grama Niladhari No. and Region:

Date:

Signature of Grama Niladhari.....

Official Telephone No:-.....

Official seal of Grama Niladhari

D) Participation in aesthetic competitions organized by other institutions outside the university during undergraduate period

Year	Competition	Regional / National / International	Achievement (placement or participation)

E) Participation in club /society activities in faculty or outside (e.g. Lions, Gavel, Toastmasters etc.) during undergraduate period

Year/s	Activity		Role or placement

F) Aesthetic qualifications obtained (at any time)

Year	Qualification & awarding institution	Comments if any regarding this qualification

G) Any other extracurricular skills for which you can provide documentary proof

Year	Item	Role

I have read and understood the instructions given above and hereby confirm that the abovementioned details are true to the best of my knowledge. I also understand that documentary proof can be requested for any or all of the information I have provided, and if proved false it will lead to my instant disqualification.

Date:-.....

Signature:-.....