

UNIVERSITY OF JAFFNA

The Bursary from the Alumni of the 1974/75 Batch of the Faculty of Science
University of Jaffna & Well Wishers

Full Name:								
Title:		Rev. / Sis. / Mr. / Miss. / Mrs. (Please circle the appropriate one)						
Contact Details:								
Permanent:								
Temporary:								
Mobile No:				Email id:				
NIC No:				District:				
GS division:				DS division:				
Course Details:								
Course of Study:				Faculty / Department / Unit:				
Registration No:				Academic Year:				
Year of Study:		1 st year / 2 nd year / 3 rd year / 4 th year / 5 th year (Please delete the inappropriate one)						
Are you accommodated in the University hostel:				Yes ☐		No ☐ (Please tick the appropriate one)		
Are you physically impaired		Applicable ☐ Not Applicable ☐						
Are you married ☐ Single ☐		If you are married, is your spouse employed ☐ unemployed ☐						
		If your spouse is employed, the gross annual income of your spouse:						
Family Details:								
Is your father Alive ☐ Not Alive ☐				Is your mother Alive ☐ Not Alive ☐				
If Father Alive				If Mother Alive				
Is he Physically impaired		Applicable ☐ Not Applicable ☐		Is she Physically impaired		Applicable ☐ Not Applicable ☐		
Occupation:				Occupation:				
Annual income:				Annual income:				
Siblings Details:								
Number of Siblings ☐		Schooling ☐	Higher Studies ☐ Married ☐ Single ☐		No. of employed ☐ Married ☐ Single ☐		No. of unemployed ☐ Married ☐ Single ☐	
Total Annual income from the Single employed siblings: (Please attach the supporting certified document)								
Annual family income:		Please tick (✓) the appropriate range below: (Please attach the supporting certified documents)						
Below Rs. 50,000 ☐		Rs 50,000 to Rs 100,000 ☐	Rs 100,000 to Rs 300,000 ☐		Rs 300,000 to Rs 500,000 ☐		Above 500,000 ☐	
Do your family have Samurdhi or Aswesuma:			Yes ☐ (Please attach the supporting certified document)				No ☐	
Expected Monthly Non-Academic Expenditures		Please tick (✓) the appropriate range below: (Cost for Communication, Food, Clothing, Accommodation, Transportation and etc.)						
Below Rs. 8,000 ☐		Rs 8,000 to Rs 15,000 ☐		Rs 15,000 to Rs 25,000 ☐		More than Rs 25,000 ☐		
Are you receiving any financial assistance / scholarships from the University (Please tick the appropriate one)								
Mahapola ☐		Bursary ☐		Any other scholarships/Financial assistance ☐				
				Name of the scholarships/Financial assistance:		Amount per annum:		
Are you getting any other Financial Assistance other than the University				Yes ☐		No ☐		
If yes	Name of the scholarships/Financial assistance:					Amount per annum:		

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- I certify that all the information provided above is true and accurate to the best of my knowledge. I understand that if any information is found to be false, my scholarship may be prematurely cancelled.
- I submitted a clear copy of my Bank Pass Book (Bank of Ceylon or People's Bank), certified by my Faculty AR/SAR/DR.
- I acknowledge that providing my bank details does not mean I have been selected for the financial assistance.

Signature of the student: _____

Date

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.

Name of the Grama Niladhari:

Signature and Official Seal of the Grama Niladhari: **Date**

Name of the Divisional Secretary: _____

Signature and Official Seal of the Divisional Secretary: _____ Date _____

Recommended / Not Recommended for Financial Assistance

Justification:.....

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Student Counselor _____
Date

Recommended / Not Recommended for Financial Assistance

Dean **Date**

Recommended / Not Recommended for Financial Assistance

Director / Students' Welfare Date

The above Student has / has not been selected for the _____ Financial Assistance

Senior Assistant Registrar / Welfare Services	Date
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NOTE : Please note that providing your bank details does not mean you have been selected for the Financial Assistance; It is collected only to ensure a smooth process after selection.