UNIVERSITY OF SRI JAYEWARDENEPURA APPLICATION FOR HOSTEL FACILITIES

Academic Year 2015/2016

(2017-Senior Students only)

Reg.No	
Course	
Academic year	

Divisional Secretarial Office

2. The Way of the state of the way of the wa	The duly complete and Welfare Branch Hostel Application. Appeals are mapplication. Married stude eligible for hosteligible f	pleted application ch, On or Before ations, relevant in Web Site. (Univot acceptable. In the stell accommodation of the Plants and those who stell accommodation of the Plants in the permanent Adoptive of the permanent Adoptive	tel accommodation shou m two stamp size photog	chers and Selecte p.ac.lk) hould be forwarde and regulations in ald submit the receptable. (Registered	d/Not Selected lists ed in the first insis hostels in previous sipt for payment of Number and the N	can be seen in tence with the syears, are not hostel fee and tame should be
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01. i. Nam ii. Perm Clos Tota	betained with vritten on the me with Initia manent Addresest City to the al distance be	2.5 cm "X" 3.5 c backside of the P ls:ess:	m two stamp size photograph.) dress: nent address and the Uni	versity (in km)	Number and the N	ne
ii. Pern Clos Tota	manent Addrosest City to the all distance be	ess:ne permanent Ado	dress:	versity (in km)	T.Pho	
Clos Tota	sest City to that distance be	ne permanent Ado	dress:nent address and the Uni	versity (in km)		
Tota	al distance be	tween the perman	nent address and the Uni	versity (in km)		
		•				
iii. Mal	ale /Female /F	Rev. (Mark "X"	in the relevant places.)	Male	Female	Rev.
			I ,			
Inc Re	ncome eceiver	ome from employ: Name	Occupation and Designation and Address	uardian Monthly Salary/income	Other Incom	e Monthly Total Income
Mo	Iother					
Far	ather					
Gu	uardian					
(If w	working Publ	ic Sector / Corpor	Monthly)/Statutor ration /Ranaviru/Statutor when filling the application	ry / Private Sector/		

03. Number of brothe	ers/sisters	s in your fa	mily (At	tach certified copies of birth certificates)					
No of age under 06 years	No. of age between 06-20 years		, ,			Forces disabled			
				1	<u>-</u>				
04. Father is living? Mother is living?	Yes No								
C	Yes								
(Mark "X" in the	relevant p	places) (If	father or	mother is not alive, please attach a copy of the	death cert	tificate)			
05.i Are you a different attached.)	ently able	ed person?	Yes / No	(recognized medical certificate with relevant d	etails sho	ould be			
06. Any other comme	ents in b	rief that yo	ou have no	ot written above and would be helpful to receive	e hostel fa	icility.			
I, hereby certify that	the abov	e informa	tion are t	rue and correct and if it has been revealed that	at they are	e false or			
incorrect, I know that	t I am n	ot entitle	for hoste	l accommodation. Also I certify that I will	obey all	rules and			
regulations pertaining	to hostel	accommo	dations.						
Date				Applicant's Signature	e				
Registrar						·			
University of Sri Jaye	wardenej	pura.							
G 410.1 11 T	6 P								
<u>Certifying the Incom</u>	<u>ie of Par</u>	<u>ents</u>							
According to my kno	wledge I	certify the	at Mr/Mrs	s/Msis resid	uary at n	ny Grama			
Sevaka division	and ap	oplying f	or hoste	el facilities at University of Sri Jayer	wardenep	ura and			
her/his/Parents/Guard	ians mo	nthly inc	come is	Rs. (Mo	onthly In	come In			
words)									
Divisional Secretary's		re and Sea	l		Grama Sevaka's Signature and Sea				
Date				Date					

Note: * Altered applications will be rejected.

Tele Phone No.

^{*} The University expects that Grama Sevaka Niladari and Divisional Secretary will provide accurate details to certify above information regarding the income.