



UNIVERSITY OF COLOMBO SCHOOL OF COMPUTING – SRI LANKA

APPLICATION FOR THE SHOREA ROBUSTA SCHOLARSHIP – 2024/2025  
(UCSC 4<sup>th</sup> YEAR SPECIAL BURSARY)

- 1. Full Name: Mr./Miss/Mrs./Rev.: .....
- .....
- 2. Permanent Address: .....
- .....
- 3. UCSC Registration number: .....
- 4. Distance (to the closed Kilometers) from your permanent residence to the University of Colombo  
.....
- 5. State whether you are a recipient of Mahapola/ Bursary or any Other Scholarship. If so, state the amount received:  
.....

6. Details of family:  
State details of unmarried brothers and sisters as at **31.12.2023**

No.	Name	Date of Birth & Age	Name of the School / Higher Educational Institution at which he / she is studying	University Registration Number / Course of Study and Year of Study	Whether he/she is a recipient of Mahapola / Bursary / Any other Scholarship	Whether he / she employed
1						
2						
3						
4						
5						

7. Please give justification with regard to your eligibility to consider for such a special bursary:  
.....  
.....  
.....

8. Fill in this section only if you are married:

Date of marriage.....  
(Annex marriage certificate)

Name of spouse:.....

If spouse is employed name of institution where she/he is employed: .....

.....

Post held: .....

Present salary: (state the monthly salary inclusive of all allowances) .....

9. Details of Parents/Guardian:

Details of Father:

(1) Full Name:

.....  
.....  
.....

(2) Whether living or deceased: .....

(If deceased, annex death certificate)

(3) If living, Age :

Years:..... Months: .....

(4) Father's Occupation:

.....  
.....

(5) Address of present / previous employment:

.....

(6) State the full annual income derived from employment / Pension Rs. ....

(Full annual income as at **31.12.2023**, should be declared).

\*Please annex details of salary

(7) Annual income derived from houses & properties: Rs. ....

(8) Annual income derived from all other sources: Rs. ....

Father's total annual income Rs. ....

(9) Whether Income tax is paid .....

Details of Mother:

(1) Full Name:

.....  
.....  
.....

(2) Whether living or deceased: .....

(If deceased, annex death certificate)

(3) If living, Age :

Years:..... Months: .....

(4) Mother's Occupation:

.....  
.....

(5) Address of present / previous employment:

.....

(6) State the full annual income derived from employment / Pension Rs. ....

(Full annual income as at **31.12.2023**, should be declared).

\*Please annex details of salary

(7) Annual income derived from houses & properties: Rs. ....

(8) Annual income derived from all other sources: Rs. ....

Mother's total annual income Rs. ....

(9) Whether Income tax is paid .....

10. Father's and Mother's total annual income: (Total income in cage 9)

Rs. ....

(write total full annual income of father and mother in words)

11. Details of Guardian:

This section should be filled by applicants who do not have parents or applicants who are not in the charge of their parents.

- (1) Name of Guardian:.....
- (2) Permanent address:.....
- (3) If employed, post held:.....
- (4) Annual salary: (annex details of salary.).....
- (5) Annual income derived from houses & properties / property of temple:  
.....
- (6) Age:.....

12. Declaration by applicant:

I hereby certify that the information given above is true and accurate to the best of my knowledge, and that I do not pay income tax. I am also aware that if any information is found to be untrue by the University Authorities, my application will not be considered for the above Special Bursary.

Date: .....

.....  
Signature of Applicant

**Recommendation of Gramaseva Niladhari**

13. Name of the Gramaseva Niladhari :.....

Number and Division of Gramaseva Niladhari :.....

I hereby certify that the annual income of the parents/ guardians stated in cage 09,10, 11 is Rs. .... (amount in word) and that I have compared the documents presented by the applicant with the information given about the income and properties that to the best of my knowledge and understand they are \*accurate/ inaccurate due to the following reasons.

.....  
.....

I further certify that the parents of the applicant receive/ do not receive Rs..... from Government Relief Programme (eg. Samurdhi).

(\*Please strike out the inappropriate words)

Date: .....

.....  
Signature of Gramaseva Niladhari

**Seal**

Name of the Divisional Secretary : .....  
Divisional Secretariat : .....  
District : .....

I certify the signature of the Grama Seva Niladhari.

Date : .....

.....  
Signature of Divisional Secretary

**Seal**

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**For Office Use Only**

Academic Performance	
<b>Year</b>	<b>GPA</b>
1 <sup>st</sup> Year	
2 <sup>nd</sup> Year	
3 <sup>rd</sup> Year	
Overall Ranking of the Student at the end of the third year <input type="text"/>	

I certify that ..... has not committed any violation of Examination rules and regulations.

Date.....

.....  
Senior Assistant Registrar/ Examinations