

UNIVERSITY OF COLOMBO SCHOOL OF COMPUTING - SRI LANKA

APPLICATION FOR THE SHOREA ROBUSTA SCHOLARSHIP – 2025/2026 (UCSC 4th YEAR SPECIAL BURSARY)

Perma	Permanent Address:					
	-					
Dıstar	ice (to the close	d Kilometers) from	n your permanent res	idence to the Uni	versity of Coloi	nbo
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State receiv		a recipient of Mal	hapola/ Bursary or an	y Other Scholars	hip. If so, state	the am
100011						
•••••					•••••	•
	s of family: details of unmar	ried brothers and	sisters as at 31.12.20 2	24		
No.	Name	Date of	Name of the	University	Whether	Whe
140.	Name	Birth &	School / Higher	Registration	he/she is a	he / s
		Age	Educational Institution at	Number / Course of	recipient of Mahapola /	empl
			which he / she is	Study and	Bursary /	
			studying	Year of	Any other	
1				Study	Scholarship	
2						
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		1,1	your eligibility to con	1 6 1	. 11	

(2) Whether living or deceased:	(Annex marria	ge certificate)
Post held: Present salary: (state the monthly salary inclusive of all allowances) Details of Parents/Guardian: Details of Father: (1) Full Name: (1) Full Name: (2) Whether living or deceased: (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 31.12.2024, 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. (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: (4) Mother's Occupation: (5) Address of present / previous employment: (5) Address of present / previous employment: (6) State the full annual income derived from employment / Pension Rs. (Full annual income as at 31.12.2024, 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. (9) Whether Income tax is paid (9) Whether Income tax is paid	Name of spouse:	
Present salary: (state the monthly salary inclusive of all allowances)	If spouse is employed name of institution whe	re she/he is employed:
Details of Parents/Guardian: Details of Father: (1) Full Name: (2) Whether living or deceased: (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 31.12.2024, 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. (9) Whether Income tax is paid Details of Mother: (1) Full Name: (2) Whether living or deceased: (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 31.12.2024, 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. (8) Annual income derived from all other sources: Rs. (9) Whether Income tax is paid (9) Whether Income tax is paid		
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properties: Rs	· · · · · · · · · · · · · · · · · · ·	
properties: Rs	(7) Annual income derived from houses &	(7) Appual income derived from houses &
sources: Rs		
Father's total annual income Rs	(8) Annual income derived from all other	(8) Annual income derived from all other
(9) Whether Income tax is paid	sources: Rs	sources: Rs
	Father's total annual income Rs	Mother's total annual income Rs
Eather's and Mather's total annual income (Total income in page 0)	(9) Whether Income tax is paid	(9) Whether Income tax is paid
Father's and Mother's total annual income: (10tal income in cage 9)	Father's and Mother's total annual income: (T	otal income in cage 9)

Fill in this section only if you are married:

8.

		section should be filled by applicants who do not ge of their parents.	have parents or applicants who are not in the			
	(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 & proper	ties / property of temple:			
	(6)	Age:				
12.	Decla	Declaration by applicant:				
	that 1		rue and accurate to the best of my knowledge, and at if any information is found to be untrue by the sidered for the above Special Bursary.			
	Date:	:	Signature of Applicant			
		Recommendation of C	Gramaseva Niladhari			
13.	Nam	Name of the Gramaseva Niladhari :				
	Num	Number and Division of Gramaseva Niladhari :				
		I hereby certify that the annual income of the parents/ guardians stated in cage 09,10, 11 is l				
	compand 1	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.				
	from	ther certify that the parents of the applicant range of Government Relief Programme (eg. Samurd ease strike out the inappropriate words)	receive/ do not receive Rshi).			
	Date:	·	Signature of Gramaseva Niladhari			

11.

Details of Guardian:

Seal

For Office Use Only

Academic Performance

Year	GPA
1st Year	
2 nd Year	
3 rd Year	

Overall Ranking of the Student at the end of the third year

I certify thatviolation of Examination rules and regulations.	has not committed any
Date	Senior Assistant Registrar/ Examinations