## UNIVERSITY OF SRI JAYEWARDENEPURA APPLICATION FOR HOSTEL FACILITIES

## Academic Year 2022/2023

(2024 - 2nd Year / 3rd Year - Non Final Year Students only)

**District** .....

Registration No	
Faculty	
Academic year at present	

Divisional Secretarial Office .....

Instru		l unclear applications	will be rejec	ted.									
2.	2. Hostel Applications, relevant information, payment vouchers and Selected/Not Selected lists can be seen in the Student Welfare Web Site.(welfare.sjp.ac.lk)												
3.	3. Appeals are not acceptable. Necessary information should be forwarded in the first insistence with the application.												
4.	4. Married students and those who have violated the rules and regulations in hostels in previous years are not eligible for hostel accommodation.												
01. i. N	Vame with Initials	:											
ii. P	ermanent Addres	s:											
Т	el. No.:												
NIC Number :													
Closest City to the permanent Address:													
Total distance between the permanent address and the University / Faculty (in km)													
;;; ]													
iii. Male /Female /Rev. (Mark "X" in the relevant places.)  iv. For which year do you apply for hostel facilities?				Iviai	Male		Female						
	Mark "X" in the r		racinues?	1 <sup>st</sup>		2 <sup>nd</sup>		3 <sup>rd</sup>		4 <sup>th</sup>			
v. Are you applying hostel facilities for the final year?													
02.i Pa	22.i Particulars of income from employment of father/mother/Guardian												
	Income Receiver	Name	Designa	pation and nation and ddress		Monthly Salary/income			Other Income			Monthly tal Income	
	Mother												
	Father												
	Guardian												
(If Sl	working Public Snould be attached	the sources: (Monthly Sector / Corporation /s when filling the apply of a family, who receive	Statutory / Pr ication)	rivate Se	ctor/ a c	certified	d copy o			culars			
	-	er, please attach a cop						dhi office	r and I	Divisior	nal Seci	etary)	

03. Number of brothers/sisters in your family (Attach certified copies of birth certificates) No of age No. of University undergraduates and indicate the name Forces No. of age Forces disabled under 06 between and the registration no of them vears 06-20 years (A letter which certifies the studentship of the relevant university should be attached) Yes No 04. Father is living? Mother is living? Yes No (Mark "X" in the relevant places) (If father or mother is not alive, please attach a copy of the death certificate and Student's Birth Certificate) 05. Are you a differently abled person? Yes / No (recognized medical certificate with relevant details should be attached.) 06. Any other comments in brief that you have not written above and would be helpful to receive hostel facility. I, hereby certify that the above information are true and correct and if it has been revealed that they are false or incorrect, I know that I am not entitle for hostel accommodation. Also I certify that I will obey all rules and regulations pertaining to hostel accommodations. Date Applicant's Signature Registrar, University of Sri Jayewardenepura. **Certifying the Income of Parents** Grama Sevaka division and applying for hostel facilities at University of Sri Jayewardenepura and her/his/Parents/Guardians monthly income is Rs. .....(Monthly Income In words)

Note: \* Altered applications will be rejected.

Divisional Secretary's Signature and Seal

Date

Grama Sevaka's Signature and Seal

Date

<sup>\*</sup> The University expects that Grama Sevaka Niladari and Divisional Secretary will provide accurate Details to certify above information regarding the income.