



UNIVERSITY OF SRI JAYEWARDENEPURA

APPEAL FOR BURSARY (As per commission circular no. 03/2019)

**\*\* This appeal form should be submitted to the welfare division if there is a change in the annual gross income of the students those who are not eligible for bursary previously. This appeal form should not be submitted for other reasons.**

1. Faculty :- .....

2. University Registration No :- .....

3. Academic year of admission to university :- .....

4. Name with initials :- ..... Rev/ Mr./Miss.

5. Permanent Address :- .....

6. Telephone No :- .....

7. District :- ..... Province :- .....

8. Number of school going Brothers / Sisters including Priests who are 19 years or under 19 years :- .....

**(Please attach photocopy of the certified Birth Certificates.)**

9. Number of Brothers / Sisters studding in any university :- .....

**(Please attach letter received from the relevant university whether in not recipient of Mahapola or Bursary)**

10. Details of Father :-

i. Father's Name :- .....

ii. Whether living or deceased :- ..... **(If deceased, death certificate should be attached)**

iii. Father's employment (if deceased employment before death. If retired employment before pension):

Rs. ....

**( If retired, pension certificate should be attached. )**

iv. Annual gross income from employment / pension (Should be attached certified salary sheet

(Relevant to last year) :- Rs. ....

v. Annual income from all other sources :- Rs. ....

11. Details of Mother :-

- i. Mother's Name :- .....
- ii. Whether living or deceased :- ..... **(If deceased, death certificate should be attached)**
- iii. Mother's employment (if deceased employment before death. If retired employment before pension)  
Rs: .....

**( If retired, pension certificate should be attached. )**

- iv. Annual gross income from employment / pension (Should be attached certified salary sheet  
(Relevant to last year) :- Rs.....
- v. Annual income from all other sources :- Rs.....

12. Total gross income of Parents :- Rs. ....

Date : ..... Signature of Applicant .....

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13. Name of Grama Niladhari : .....

Grama Niladhari No. and Region : .....

Total yearly gross income of Parents :- Rs. ....  
( in words )

Date : ..... .....

Signature of Grama Niladhari

Official Telephone No :..... .....

Official seal of Grama Niladhari

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14. Name of Divisional Secretary / Assistant Secretary : .....

Official Telephone No :..... Division : .....

Signature of Divisional Secretary / Assistant Secretary : .....

Date : ..... .....

Official seal of Divisional Secretary/  
Assistant Secretary

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