

# NOTICE

## PROFESSOR NEIL FONSEKA MEMORIAL SCHOLARSHIP & NALANI JAYASINGHE SCHOLARSHIP

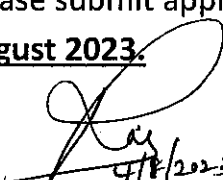
Applications for the above Scholarships are invited from the following students.

- |     |                         |              |
|-----|-------------------------|--------------|
| 1.  | ABEYASEKERA C.D.        | MD/2020/5641 |
| 2.  | DILSHARA L.G.S          | MD/2020/5690 |
| 3.  | GEETHANJANA K.H.P.A.    | MD/2020/5864 |
| 4.  | SANTHUSHI J.B.K.        | MD/2020/5815 |
| 5.  | MADHURANJALI S.H.H.S.   | MD/2020/5756 |
| 6.  | SUBASINGHE S.M.I.S.     | MD/2020/5842 |
| 7.  | KAMBURUGAMUWA R.T.      | MD/2020/5908 |
| 8.  | DINITHI B.D.            | MD/2020/5691 |
| 9.  | JAYAWICKRAMA J.A.M.L.   | MD/2020/5736 |
| 10. | RATHNAYAKE K.K.D.A.U.K. | MD/2020/5798 |

The Scholarship is offered to a student with poor financial background and participation in extra curricular activities.

Application forms are available with the Assistant Registrar, Faculty of Medicine. All applications should be accompanied by an AGA'S certificate regarding parental income information provided will be kept confidential.

Please submit applications to the establishment branch on or before 24<sup>th</sup> August 2023. (FOM)

  
Assistant Registrar  
Faculty of Medicine  
04<sup>th</sup> August 2023

# APPLICATION FOR SCHOLARSHIPS

(Prof.Neil Fonseka & Nalani Jayasinghe)

1. Full Name & Student Number : .....
2. Date of Birth : .....
3. Address during term time : .....
4. Home Address : .....
5. District : .....
6. Province : .....
7. Telephone Number : .....
8. School/s Attend : .....
9. Year of entering University : .....
10. Attempt at G.C.E.'A' Level : (1<sup>st</sup> /2<sup>nd</sup>/3<sup>rd</sup> attempt)
11. Father's monthly income : .....
12. Mother's monthly income : .....
13. Number of brothers and sisters under 18 years : .....
14. Receiving Mahapola Scholarship: Yes/No
15. Receiving any other scholarship/Bursary : Yes/No

Name	Amount
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.....	.....

16. Extra Curricular Activities :  
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.....  
.....

I certify that the above is true.

.....	.....
<b>Signature</b>	<b>Date</b>
.....	.....

## FOR OFFICIAL USE

Certificate of Income : Submitted/not submitted

Interview held on :