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# MINISTRY OF HIGHER EDUCATION & RESEARCH SRI LANKA

# GOVERNMENT OF SRI LANKA PRESIDENTIAL SCHOLARSHIPS FOR FOREIGN STUDENTS

# FOR THE ACADEMIC YEAR 2014/15

**APPLICATION FORM** 

Ministry of Higher Education and Research No.18, Ward Place Colombo 07 Sri Lanka

# **Check List to Applicants**

• Each Candidate must submit 3 sets of completed application forms (one original). Please note that each application should have copies of all the required documents with it.

# Note: Certified English translations of supporting documents must be provided (i.e. certificates, testimonials, and transcripts) for documents that are not in English.

#### Check list

I.	Certified copy of Birth Certificate	
II.	Certified copy of official evidence of any name change	
III.	Certified copies of the academic transcripts of G.C.E A/L and G.C.E O/L or their equivalents	
IV.	Original letter obtained from the Board of Examinations	
V.	Certified copy of IELTS/TOEFL certificate	
VI.	Certified copy of the data page of applicant's passport	
VII.	Medical Certificate	
VIII.	Police Report	

I submit herewith all the relevant documents as above.

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Date

Signature of the applicant

# 1. PERSONAL DETAILS

Name in Full (Please fill in block letters and underline the surname):								
	Ι							
Passport No:	Citizenship:							
Date of Birth ( dd/mm/yyyy ):	Country of Birth:							
Ethnicity:	Religion:							
Marital Status: Single / Married / Divorced / Widowed	Gender: Male / Female							
Postal Address:								
Telephone No: - <	Fax No:  (country code) (area code) (tel no.)							
E-mail address :								
Details of the Parent/ Guardian:-								
Name :								
Relationship (Father/Mother/etc)								
Occupation / Designation:								
Residence Address:								
Office Address:								
Contact Number/s :								
E-mail Address :								

### 2. ACADEMIC QUALIFICATIONS

#### A. Institutes/ Schools

Name of Institute/ School	From	То	Qualifications Obtained	Medium of Instruction

# B. General Certificate of Education (Advanced Level or Equivalent) – Certified copies of

certificates and transcripts in English should be annexed.

Stream:	Mathematics Bio-so	cience Arts	Comm	erce	
Year	Name of the Examination	Subjects offered and Grades / Marks obtained	Medium of Instruction	Awarding Body	Final Certificate / Level Qualification Awarded

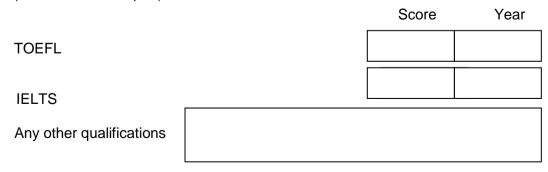
C. General Certificate of Education (Ordinary Level or Equivalent) - Certified copies of certificates and transcripts in English should be annexed.

Year	Name of the Examination	Subjects offered and Grades / Marks obtained	Awarding Body	Medium of Instruction	Final Certificate / Level Qualification Awarded				

- D. Any Other Qualifications:
- E. Academic Distinctions or Prizes Received:

### 3. ENGLISH LANGUAGE PROFICIENCY

Give the result/score of any language test taken: *(Enclose certified copies)* 



## 4. STATE THE ORDER OF PREFERENCE TO THE DEGREE PROGRAMMES WHICH YOU WISH TO FOLLOW AT A UNIVERSITY IN SRI LANKA (Under no

circumstances the order of preference can be changed)

#	Degree Programme	University
1		
2		
3		
4		
5		
6		

### 5. APPLICANT'S STATEMENT OF PURPOSE

In an essay of up to 200 words, describe your plan of study and how this relates to your future career plan. (You may use additional sheet/s of paper if space on this form is insufficient). ..... ..... ..... ..... ..... ..... ..... ..... ..... ..... ..... ..... ..... ..... ..... ..... Please tick if additional material enclosed

### 6. DECLARATION

#### A. Student's Declaration

I hereby certify that all the statements made on this application and in the attached documents are true and correct. I have read and understood all the terms and conditions regarding the scholarship mentioned under the scholarship details in the scholarship brochure. I shall return to my home country as soon as I complete my scheduled programme and will not extend my stay without approval of the Ministry of Higher Education & Research, Sri Lanka.

•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
Date																										

Signature

#### **B.** Official Declaration

(To be completed by the nominating authority)

Name of the Country: Name of the Nominating Agency:
I nominate Rev./Mr./Ms for a Bachelor's degree offered by the Ministry of Higher Education and Research, Sri Lanka.
Name :
Position :
Signature :
Official Stamp :
Date

#### HEALTH CERTIFICATE

(Please put " $\sqrt{}$ " in relevant cage)

Name : Postal address :	Sex: Male	Date of Birth :	РНОТО
Nationality :	Place of Birth	: Blood gro	up:
Have you ever had any of the follo	owing diseases?	I	
Yes   Typhus fever    Poliomyelitis    Diphtheria    Scarlet fever    Relapsing fever    Do you have any of the following   Toxico mania   Mental confusion   Psychosis:   Manic psychosis   Paranoid psychosis   Hallucinatory	Yes No		
Height : cm	Weight:	kg Blood pressu	<b>ire:</b> mmHg
Development:	Nourishment:	Neck:	
Vision:	Corrected vision:	Eyes:	
Colour sense:	Skin:	Lymph nodes	s:
Ears:	Nose:	Tonsils:	
Heart:	Lungs:	Abdomen:	

Spine:		Extremities:		Nervous system:
Other abnormal findings		I		
Chest X-ray exam			ECG	
Laboratory exam for HIV/AIDS (Please attach test report of HIV/AIDS, Syphilis etc)				
None of the following disea	ses (	or disorders found du	ring the prese	ent examination.
Cholera		Venereal Dise Lung tubercul HIV/AIDS Psychosis		
Suggestion:			Signature o	of the physician
Date			Offic	ial Stamp