**APPLICATION FOR FINANCIAL AID – YEAR 2025/ 2026**

**FACULTY OF VETERINARY MEDICINE AND ANIMAL SCIENCE**

**UNIVERSITY OF PERADENIYA**

1. **PERSONAL INFORMATION**

1.1 Name in Full (*Block letters*):

………………………………………………………………………………………………………

………………………………………………………………………………………………………

1.2 Registration Number: …….……… 1.3 Batch: …………….……

1.4 Contact Number: ……………………… 1.5 Email: …….……………….…………….….

1.6 Home Address: ………………………………………..……………………………………….

………………………………………………………………………………………………………

1.7 District from which you entered the university: ………………………………………………..

1.8 Residence during academic year (address): ……………………………………………………

………..………………………………………………………………..……………………………

1.9 Monthly rental for accommodation: ……………………………………………………………

1.10 Do you receive Mahapola/ University Bursary or any other financial assistance from the university or any other organization (*underline applicable*): **Yes/ No**

If **Yes**, please provide following details (*list all financial assistance you receive/ will receive in future*):

|  |  |
| --- | --- |
| **Name of Scholarship/ Financial grant** | **Amount received per year** |
|  |  |
|  |  |
|  |  |
|  |  |

1. **FAMILY DETAILS**

2.1 No. of family members: …………

2.2 No. of siblings attending school: ………

If you have siblings attending school, please fill in the following table.

|  |  |  |
| --- | --- | --- |
| **Name** | **Date of birth** | **School** |
|  |  |  |
|  |  |  |
|  |  |  |

2.3 No. of siblings attending university or other higher educational institute: ………

If you have siblings attending university or other institute, please fill in the following table.

|  |  |  |
| --- | --- | --- |
| **Name** | **Higher Educational Institute/ Course** | **Year of Study** |
|  |  |  |
|  |  |  |
|  |  |  |

1. **FAMILY INCOME**

3.1 Gross annual income of the family: ………………………………………….

3.2 No. of family members who are employed: …………

If your parents or immediate family members living at home\* are employed (including self- employment) please provide the following details for each employed family member.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Relationship to applicant** | **Employer/ Occupation** | **Monthly income** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

\*Family members living at home are those who contribute to the gross annual income of your family

3.3 No. of family members who are unemployed: …………

1. **PERSONAL STATEMENT**

Please provide a short account **in your own words**, about why you require financial assistance, including any special circumstances you/ your family are undergoing.

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**I hereby certify that the above details are true and correct to the best of my knowledge.**

………………………….. …………………………..

Signature of Applicant Date

**…………………………………………………………………………………………………………..**

**FOR OFFICE USE ONLY**

Application No.: …………….

Supporting documents: 1. Academic details

2. Employment status of parents

3. Details of siblings

4. Additional documents

**GUIDELINES FOR APPLICANTS**

1. **You may apply for financial aid even if you receive the Mahapola scholarship or the University Bursary.** Although preference may be given to students who do not receive the Mahapola scholarship or the University Bursary, your application will be considered if you require additional financial assistance.
2. **Please DO NOT apply for a bursary if you have already received a bursary which will cover the academic year 2025/2026.**
3. **Please attach certified copies of the following.**
4. If you have parents/ family members who are employed, salary particulars stating the Gross Annual Income (including allowances) of each employed parent/ family member, from the occupation/ pension certified by the appropriate official should be attached (original document). A letter from the employer certifying the salary particulars of the applicant’s parents/ family member should also be submitted.
5. In the case of unemployed parents, a letter or a certificate obtained from the Divisional Secretary on the recommendation of Grama Seva Niladhari of the area of the candidate’s permanent residence should be submitted.
6. If your father/ mother is an entrepreneur/ self-employed, an **Annual Income Assessment Report** **for the period 1st November 2023 – 30th November 2024** certified by the Divisional Secretariat should be attached.
7. If you have any siblings attending school or any higher education institute (i.e. if you filled the tables for 2.2 and/ or 2.3), please attach a letter from the head of the relevant institute (e.g. School Principal/ Dean of Faculty) certifying that your sibling is a pupil of that institute. Attach certified copies of birth certificates for all siblings listed in tables 2.2 and 2.3.
8. If you have any special circumstances requiring financial assistance (e.g. a medical condition of yours or of an immediate family member that requires extra expenses), please attach evidence (e.g. a letter from the attending physician).
9. Completed applications together with relevant supporting documents should be sent via registered post or handed over in a sealed envelope addressed to the “Senior Assistant Registrar, Faculty of Veterinary Medicine and Animal Science, University of Peradeniya, Peradeniya” **on or before 1630 hrs on 10th January 2025**