| For Office Use Only: | |
|-----------------------------------|---|
| Application Number | : |
| Date of received | : |
| Signature of the receiving person | : |

Please attach one recent photograph here and one with the form (passport size)

| STUDENT REG.NO: | |
|-----------------|--|
| NIC No : | |

<u>University of Vocational Technology – Hostel Application</u>

Please read the instructions given at the bottom before filling the application

| 1. | Full Name: Mr/Ms/Mrs |
|----|---|
| | |
| 2. | Name with Initials: |
| 3. | Permanent Address: |
| | |
| 4. | Student's Contact Numbers: Mobile |
| | Resident: |
| 5. | Email address: |
| 6. | Temporary Address (if differ from permanent): |
| | 、 |
| 7. | Closest Town to the Residence: District: |
| 8. | Distance to the Closest Town from residence (km): |

9. Distance from the Closest Town to the University:

10.Details of the father/Guardian

| Name | | | |
|--------------------|------|---------|------------------------|
| Occupation | | | |
| Monthly salary | | | (please attach proofs) |
| Address of working | | | |
| place | | | |
| | | | |
| Contact No. | Mob: | Office: | |

11.Details of the mother

| Name | | |
|--------------------|------|------------------------|
| Occupation | | |
| Monthly salary | | (please attach proofs) |
| Address of working | | |
| place | | |
| | | |
| Contact No. | Mob: | Office: |

12. Whether you are suffering from any diseases/disabilities

.....

13. Any other special reasons for you to be considered for hostels

.....

.....

I declare that all the above information are true and correct to the best of my knowledge. If any information given by me is found to be false or incorrect the hostel facility will be withdrawn and I agree to follow rules and regulations stipulated by the University, if I am selected for residential hostels.

| Date | Signature of the Student |
|------|--------------------------|
|------|--------------------------|

I certify that the above particulars submitted by Mr. /Misstrue and correct.

 Date.....
 Signature of Grama Niladhari

 Certify with rubber stamp

Instructions:

- 1. Application closing date is 10th April 2018
- 2. Please send the correctly completed application **on or before the closing date** by registered post to " Assistant registrar, Student Service Unit, University of Vocational Technology, No.100, Kandawala Road, Ratmalana
- **3.** Copies of relevant documents such as Salary Particulars/ income certificates should be attached to the application
- 4. Recent photograph of the student should be attached in the application and an **additional photograph** should be sent along with the application
- 5. Applications received after the due date will not be considered
- 6. Applications that are incomplete or with false information would be rejected. Please indicate "N/A" if anything is not relevant.
- 7. A medical certificate obtained from a recognized Medical Practitioner from whom you are/were taking treatment for any physical sickness or for any other sickness should be forwarded along with the application, in application for hostel is made on sickness.
- If you are selected for the hostel you are required to pay following payments at the registration for hostels.
 Rs. 10, 000.00 for 10 months

Rs. 1, 100.00 of refundable deposit

9. Please write "Hostel Form" on the left corner of the envelope.