**De Mazenod Scholarship Foundation**

**De Mazenod House, 40, Farm Road, Mattakkuliya, Colombo 15.**

1. Full name of the student: ……………………………………………………………………………………………….
2. Home Address: ………………………………………………………………………………………………………………

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

1. Date of Birth: …………………………………………………………………………………………………………………
2. Religion: ………………………………………………………………………………………………………………………..
3. Telephone Number: ………………………………………………………………………………………………………
4. Email Address: ……………………………………………………………………………………………………………..
5. Name and place of the School where Ord. Level was done: ……………………………………………

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

1. Year of Ordinary Level Examination: …………………………………………………………………………….
2. Results of Ord. Level: As……………… Bs ………………… Cs ………………… Ss)……………………….
3. Name and place of School where GCE Adv. Level was done: ………………………………………

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

1. Year of Advanced Level Exam: ………………………………………………………………………………………
2. Results of G.C.E. Adv. Level: Subjects with grades: a)……………………………………( );

b) ……………………………………( ); c)………………………………….( ); d) ………………………………( )

 13) Father’s full name: ………………………………………………………………………………………………………

 Father’s Employment: ……………………………………………………………………………………………………

1. Mother’s name: …………………………………………………………………………………………………………..

Mother’s Employment: ………………………………………………………………………………………………….

1. Number of siblings: a) Brothers ……………………………… b) Sisters: ……………………………….
2. Family monthly income: Rs……………………………………………….

Hereby I declare that the above particulars are true and I promise to apply myself well to do my University studies well.

1. Signature of the applicant: ……………………………………………………….

1. The Name of the recommending Priest: ……………………………………………………………………..

Signature of the Priest: …………………………………………… Date: …………………………………………