



SRI LANKA LAW COLLEGE NOTICE

Prins Rajasooriya Memorial Scholarship - 2025

Applications are invited for consideration for the award of the above Scholarship.

The value of the Scholarship is LKR 5,000/-.

Criteria:

1. Should not be more than 28 years of age on January 01, 2025.
2. Should have done well at the Law College Entrance Examination.
3. Should not be recipients of Mahapola or any other Scholarships.

The applicant's economic circumstances should be such that he/she requires assistance to complete studies at Sri Lanka Law College. The continuance of the award will depend on the successful passing of examinations at Law College.

It will be granted irrespective of the area of residence or ethnicity. The Scholarship should be used for payment of Law College tuition fees or the purchase of books etc.

Duly filled application forms should be posted to Sri Lanka Law College/handed over to the Reception, Law College (please mention the Scholarship you are applying for on the envelope) or email scholarships@slc.ac.lk, on or before June 30,2025

PRINCIPAL

May 30, 2025



Application No. 07

SRI LANKA LAW COLLEGE SCHOLARSHIP FOR STUDENTS
APPLICATION FORM
YEAR-2025

Name of the Scholarship: Prins Rajasooriya Memorial Scholarship

1. Full Name of the Applicant :- (Mr./M/Ms)
2. Name with Initials :-
3. Age (2025.01.01) :- Date of Birth:-
4. National Identity Card No :-
5. I. Law College Registration No :-
- II. Year you entered the Law College:-
- III. Academic Year (Preliminary/Intermediate Final) :-
- IV. Entrance Examination Marks and Year :-

6. Results of the Preliminary/Intermediate Year Examinations

Year	Examination	Results	Average

7. Permanent Address:-
8. Contact Telephone Number :-
9. Name of the Father/Guardian :-
10. Nature of his employment :-
- Annual Income:- Rs.
- If mother is employed :-
- Nature of employment :-
- Annual Income:- Rs.
11. Other sources of annual income :-

13. Do you receive Mahapola scholarship ? (Yes / No)

12. Name of Brothers and Sisters under 21 years of age :-

Name in full	Age	If studying, Present School / University

certify that the particulars mentioned here are true and correct.

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Date

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Signature of the applicant

Name of Grama Niladhari certifying income:-

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Name of Divisional Secretary/Add. Divisional Secretary.....

Address of D.S.'s/A.D.S.'s Office:-

Signature of D.S./A.D.S. :-

Rubber Stamp of D.S. /A.D.S. :-

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For official use only