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கூட்டிணைக்கப்பட்ட சட்டக்கல்விப் பேரவை - இலங்கை சட்டக் கல்லூரி  
THE INCORPORATED COUNCIL OF LEGAL EDUCATION - SRI LANKA LAW COLLEGE

## **R. A. Kannangara Memorial Scholarship – 2026**

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

- The value of the Scholarship is LKR 2,500/-

Criteria;

1. Should not be more than 28 years of age on January 01,2026
2. Should have done well at the Law College Entrance Examination.
3. Should be permanent residents of the **Matara Administrative District** and should have attended schools in the **Mater Administrative District**.

Selection will be based on:

- i. Performance at the Entrance Examination In order of merit.
- ii. Economic need.

It is the donor's wish that Scholarship be given to needy & deserving Law College students.

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](mailto:scholarships@slc.ac.lk), on or before June 15,2026

PRINCIPAL

May 05, 2026

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முகவரி } 244, புதுக்கடை வீதி, கொழும்பு 12, இலங்கை  
Address } 244, Hulftsdorp Street, Colombo 12, Sri Lanka

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தொலைபேசி எண் } +94 112 473 119  
Telephone Number }

විද්‍යුත් තැපෑල } enquiries@slc.ac.lk  
மின்னஞ்சல் }  
Email }

[www.slc.ac.lk](http://www.slc.ac.lk)



Application No. 11

**SRI LANKA LAW COLLEGE SCHOLARSHIP FOR STUDENTS**  
**APPLICATION FORM**  
**YEAR-2026**

**Name of the Scholarship: R. A. Kannangara Memorial Scholarship**

1. Full Name of the Applicant :- (Mr./M/Ms) .....

2. Name with Initials :- .....

3. Date of Birth:- ..... Age as at 2026.01.01:- .....

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 :- .....  
.....  
.....

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.

.....

Date

.....

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:- .....

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

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

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For official use only