



# DECLARATION FOR THE PURPOSE OF OBTAINING RESIDENTIAL FACILITIES

Please affix recent  
Photograph

(Taken within last  
month)

## PERSONAL DETAILS

NAME

REGISTRATION NUMBER

FACULTY

COURSE/PROGRAMME

NIC NUMBER

RACE

SINHALA

TAMIL

MUSLIM

OTHER

RELIGION

BUDDHIST

HINDU

ISLAM

CATHOLIC

OTHER

## CORRESPONDENCE DETAILS

PERMANENT ADDRESS

MOBILE PHONE NUMBER

EMAIL ADDRESS

**PARENT OR GUARDIAN PARTICULARS**

NAME OF PARENT OR  
GUARDIAN


RELATIONSHIP

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OCCUPATION

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CONTACT ADDRESS

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RESIDENTIAL PHONE NUMBER

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MOBILE PHONE NUMBER

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EMAIL ADDRESS

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**EMERGENCY CONTACT**

NAME OF CONTACT PERSON

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RELATIONSHIP

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RESIDENTIAL PHONE NUMBER

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MOBILE PHONE NUMBER

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EMAIL ADDRESS

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**MEDICAL HISTORY**

BLOOD GROUP

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If you are physically disabled, please state the nature of disability or any medical condition which may be of concern.

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I have carefully read and understood the content embodied in the letter of allocation addressed to me, and further pledge, that I take up residence in terms of the rules and conditions set out therein and I hereby declare that the particulars furnished above are true and accurate to the best of my knowledge and belief further, I am aware that in the event, the University authorities detect any information furnished by me to be false and incorrect, I will not be eligible for residential facility.

.....

DATE

.....

SIGNATURE