

EASTERN UNIVERSITY, SRI LANKA

APPLICATION FORM

DOCTOR SABARATNAM PRIZE FOR INTERVENTIONAL RESEARCH									
PROCTOR COOMARASA	MY PRIZ	ZE FOR							
			((Pl tick	ε (✔)tn	le relev	ant coi	umn) •	
A. Personal Information:	í								
1. Full Name of Applicant:									
2. Designation :									
If Student									
a) Year of study :									
b) Degree Programme :									
c) Student Reg. No :									
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3. Faculty :									
4. Personal Address :									
4. Personal Address .									
5. Telephone No :									
6. Email :		<u> </u>				<u> </u>	<u> </u>		
O. Elliali .									
Project title:									_
Principle Investigator:									
1. Name:									
2. Designation:									
3. Academic Qualifica	tions:								

4. Field of specialization:

Collaborating Investigator:
1. Name:
2. Designation:
3. Academic Qualifications:
4. Field of specialization:
Research Published on:
Name of the Journal/Proceedings:
Date of Publication:
Whether published in Srilanka
Title of Research Publication: (Attach copy of Publication)

Declaration: I declare that the Research conducted by me was published in the Journal of Local/International and attached herewith all documents related to the publication for evidence. **Principal Investigator** Signature Date Recommendations: I confirm that I have read the research publication and it is recommended/not recommended for the Award. Signature of Head of Department Date I recommend the research publication for the Award Signature of Dean of the Faculty Date Recommended/ Not recommended on..... Chairman/University Research Committee, EUSL Date Recommended / Not recommended on..... •••••• Chairman/Senate, EUSL Date Recommended / Not recommended on.....

Chairman/Council, EUSL	••••	Date
For Office Use: Amount for the Award Date of the Convocation	: :	
Senior Assistant Registra	r/Academic Affairs	Date
	3	

Please list out your annexed details:

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