

**APPLICATION FOR PROFESSOR KANTHIA KUNARATNAM GOLD MEDAL**

1. Full Name: .....
2. Registration No:.....
3. Academic (a) Degree Obtained: ..... (b) Class:.....
4. Students Activities
  - a. President/Secretary of University Students Union or Faculty Students Union: .....
  - b. Treasurer/Editor of University Students Union or Faculty Students Union: .....
  - c. Executive Committee member of University Students Union or Faculty Students Union: .....
  - d. President/Secretary of University Student Societies: .....
  - e. Treasurer/Editor of University Student societies: .....
  - f. Member of a Faculty Board: .....
5. Cultural Activities
  - a. Participation in Cultural Programmes (Music, Dance, Drama), and/or Literary Programmes (Debates, Orations, Poetry, Short story writing) at university level: .....  
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  - b. Participation in Cultural Programmes (Music, Dance, Drama),and/or Literary Programmes (Debates, Orations, Poetry, Short story writing) at national level: .....  
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6. Sports activities
  - a. Full colour award: .....
  - b. Half colour award:.....
  - c. Captainship: .....
  - d. Vice captainship: .....
  - e. University Level Representation: .....
  - f. Creating new records at University Level: .....
  - g. Inter university Championship (individual event):  
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- h. Interuniversity Championship (team events): .....
- i. National Level participation: .....
- j. Provincial Level Participation: .....
- k. District Level Participation: .....
- l. All round sportsman/ sportswoman of the University: .....
- m. University Combined team Representative: .....

7. Dissemination of Scientific Knowledge

- a. Writing articles (minimum 1000 words) in national newspapers, magazines etc: .....
- b. Papers/Abstracts presented at conferences etc: .....

8. Social Activities

- a. President/Secretary of any well Known social organisation : .....
- b. Treasurer /Editor of any well Known social organisation : .....
- c. Participation in social activities initiated by recognised organisations: .....

I certify that the above facts are true and correct

Date : .....  
.....  
 Signature of the Applicant.

I certify that Mr/Miss.....  
 .....

Date : .....  
.....  
 Director, Physical Education.

I certify that Mr/Miss .....  
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Date : .....  
.....  
 President  
 Ag.SU/ASU/MSU/SSU/MS&CSU.

I certify that Mr/Miss.....  
 .....

Date : .....  
.....  
 President  
 University Students Union.

**Note: Copies of the Testimonials should be attached along with applications**