

UVA WELLASSA UNIVERSITY OF SRI LANKA
Application – Reimbursement of Accommodation Cost – Single

*Read the instructions **carefully** before filling the form and complete every question. Application cannot be considered until **fulfill** all the information and attachments required in the application.*

Section A. Personal Details

1. Name in Full: _____

_____ (IN CAPITAL LETTERS)

2. Name with Initials: (Rev./Prof./Dr./Eng./Mr./Mrs./Ms.) _____

3. Gender: Male / Female

4. Civil Status: Single / Married

5. Designation: _____

6. Nature of the Appointment: Permanent / Temporary 7. Emp. No. _____ (Refer pay sheet)

8. Date of First Appointment: _____ (DD/MM/YYYY)

9. Date of Appointment to UWU: _____ (DD/MM/YYYY) (Attach a copy of the Appointment Letter)

10. Date of Duty Assumption at UWU: _____ (DD/MM/YYYY) (Attach a copy of the Duty Assumption Letter)

11. Duty Reassumed date after a leave period (if applicable): _____ (DD/MM/YYYY)
 (Attach a copy of the Duty Resumption Letter)

Type of leave: _____ (i.e. study, maternity, vacation, special leave, etc.)

12. Department/ Division/ Unit: _____

13. Faculty: _____

14. Contact No.: _____

15. e-mail address: _____

Section B. Requirement

16. Permanent Address: _____
 _____ (Will be checked with the Personal File)

17. Write down the distance from your permanent residence (i.e. from you home) to the Uva Wellassa University of Sri Lanka (1 mile = 1.6 k.m.): _____

18. District of the permanent residence: _____

Section C. Married Details

19. State whether your spouse (if employed at UWU) getting an accommodation allowance from the University: Yes / No

NOTE: only one member of a married couple (if both are employed at UWU) is entitled for the accommodation allowance.

Section D. Affidavit & Attestation

20. Affidavit Attached: Yes / No

NOTE: The affidavit should be signed by the housing allowance (Single or Family) recipients/applicants above on a Rs. 50/- stamp.

21. Detail of Attester: Vice Chancellor / Registrar / Librarian / Bursar

NOTE: Administrative Officers should sign before the Vice Chancellor. Employees who work under Library should sign before the Librarian. Employees who work under Financial Administration should sign before the Bursar. Other Non-Academic staff members should sign before the Registrar.

21.1 Detail of Attester: Deans of Faculties: _____ (i.e. Dean/)

NOTE: Employees who work under Faculties should sign before the respective Deans of the Faculties.

Section E. Accommodation in Badulla

Details of the accommodating place in Badulla

22. Name of the owner: _____

23. Present address: _____

24. **Monthly rent / lease of the house**

25. Monthly rent (Rs.) _____ or lease amount (Rs.)

26. Date of occupation at the house: _____ (DD/MM/YYYY)

I do hereby certify that the above given details are true and correct according to the best of my knowledge.

Signature of the Applicant

Date

Please forward the application to the Convener of the Housing Committee through your proper channel with copies of required documents

Recommendation of HoD, Department of _____

Recommended/ Not Recommended (Reason if not recommended) _____

Head of the Department

Date

Recommendation of Registrar/Dean, Faculty of _____

Recommended/ Not Recommended (Reason if not recommended) _____

Registrar/ Dean of the Faculty

Date

Section F. Human Resources

The particulars/ details given in the Section A & B are true and correct according to the personal file of the applicant/ are not true and correct due to _____

_____ (Reason)

Signature DR/SAR/AR
Human Resources Division

Date

Recommendation of the Housing Committee

The Housing Committee of Uva Wellassa University of Sri Lanka at its _____ meeting held on _____ considered the application and recommended/ not recommended the allowance for the single accommodation.

_____ (Reason if not recommended)

Name	Position	Signature
_____	Chairman	_____
_____	Member	_____
_____	Member	_____
_____	Member	_____
_____	Member	_____
_____	Member	_____
_____	Member	_____

Approval of the Vice-Chancellor

Approved/ Not Approved (Reason if not approved) _____

Vice-Chancellor

Date: