



**Ministry of Health & Mass Media**  
**Asidisi - Technical Mass Media Scholarship Programme -2026**  
**SPECIMEN APPLICATION**

01. Full name in Sinhala (Mr./Mrs./Miss.) : .....
02. Full name in English block letters : .....
03. Name with Initials : .....
04. Personal Address - in Sinhala : .....
- in English block letters : .....
05. Personal Phone Number : Mobile..... WhatsApp .....
06. Date of Birth : .....
07. Age as on the closing date of application : Years..... Months ..... Days .....
08. NIC Number : .....
09. Highest educational qualification obtained : .....
10. Details of the Training Course applied (Must be a course included in the Newspaper advertisement)
- I. Course Title : .....
- II. Training Institution : .....
11. Are you able to submit a letter issued by the relevant institution confirming your eligibility for the course to the interview board?
- Yes  No
12. Have you previously benefited under the “Asidisi” Mass Media Scholarship programme? Yes  No
- If yes, name of the course and year : .....
- If so, whether the course will be completed as at 10.07.2026:
- Yes  No
13. Service Particulars
- ❖ Employment Status Permanent  Temporary  Provincial  Freelance  web  Technical
- ❖ Designation : .....
- ❖ Name of the Institution (Newspaper/ Channel/ Others) : .....
- ❖ Official Address : .....
- ❖ Telephone Number (Official) : .....
- ❖ Email Address (personal) : .....
- ❖ Accreditation Card Number issued by the Department of Government Information .....Year .....
- ❖ Professional Experience (Years) : .....
- ❖ District Covered : .....
- (for Provincial Journalists)

I hereby certify that the above particulars are true and accurate.

Date: .....

Signature of the Applicant: .....

**Recommendation of the Head of the Institution**

I recommend Mr./Mrs./Miss.....who is serving in our institution as a Permanent/ Temporary/ Provincial/ Freelance/ Web/ Technical Journalist from.....to .....as eligible to apply for the aforementioned Technical Scholarship. Further, I certify that the particular provided above true and accurate.

01. Name : .....
02. Designation : .....
03. Address : .....
04. Telephone No. : .....

Date: .....

Signature and the official stamp: .....