|  |
| --- |
| **Office use only** |
|  |

****

**Sri Lanka Technology Campus (SLTC)**

**Application Form - SLTC Staff Awards - 2025**

|  |  |  |
| --- | --- | --- |
| **Section A (Personal Information)** | | |
| 1. First Name: Click here to enter text. | 1. Last name: Click here to enter text. | |
| 1. Full Name: Click here to enter text. | | |
| 1. Name with initials: Click here to enter text. | | |
| 1. Date of Birth(dd/mm/yyyy): Click or tap to enter a date. | | 1. Age in years\*: Click here to enter text.   \*(as deadline of application) |
| 1. NIC No.: Click here to enter text. | | |
| 1. Postal address (Home): Click here to enter text. | | |
| 1. Mobile No.: Click here to enter text. | 1. Email\*: Click here to enter text.   \*(compulsory-@sltc domain) | |
| **Academic Staff** | | |
| 1. Faculty: Click here to enter text. | 1. Department: Click here to enter text. | |
| 1. Profession: Click here to enter text. | | |
| 1. Date of Appointment at SLTC (dd/mm/yyyy): Click or tap to enter a date. | | |
| **Administrative Staff** | | |
| 1. Division: Click here to enter text. | 1. Profession: Click here to enter text. | |
| 1. Date of Appointment at SLTC (dd/mm/yyyy): Click here to enter text. | | |

|  |  |
| --- | --- |
| **16. Google Scholar Profile** | |
| URL: | Click here to enter text. |
| H-index (as of application date): | Click here to enter text. |
| Total Citations (as of application date): | Click here to enter text. |
| **17. Other Researcher IDs (if available)** | |
| Open Researcher and Contributor ID: | Click here to enter text. |
| Scopus Author ID: | Click here to enter text. |
| ResearchGate: | Click here to enter text. |
| Other (please specify): | Click here to enter text. |
| **18. Professional Memberships held in any National or International Organizations** | |
| Name of the organization: | Click here to enter text. |
| Membership title: | Click here to enter text. |
| Duration of membership (yyyy-yyyy): | Click here to enter text. |
| \*\*Please add more rows and fill off, if there are more than 1 membership titles held. | |

|  |  |
| --- | --- |
| **Section B (Category of Award Applied for)** | |
| **19. Please select the award(s) you wish to apply for** | |
| **University-Level Recognition** | |
| Most Outstanding Senior Researcher |  |
| Most Outstanding Young Researcher |  |
| Top Researcher with the Highest Number of Indexed Journal Publications |  |
| Top Researcher with the Highest H-index – Lifetime Award\* |  |
| Top Researcher with the Highest Number of Citations |  |
| Best Inventor –Staff Category |  |
| Best Art and Creativity Award |  |
| **Faculty-Level Recognition** | |
| Outstanding Researcher Award |  |
| Top Researcher with the Highest Number of Indexed Journal Publications |  |
| Top Researcher with the Highest H-index – Lifetime Award\*\* |  |
| Top Researcher with the Highest Number of Citations |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Section C: Evidence of Outputs (Attach Documentary Proofs)** | | | | | | | | | | |
| **20. Please enter information on Journal Publications** | | | | | | | | | | |
| **No.** | **Name of the Authors** | **Title of the Article as in the Journal** | **Name of the Journal** | **Indexed/ Not Indexed** | **Name of the Indexing Service** | **Author Contribution (First/Second/**  **Corresponding Author)** | **Published/ Pending** | **Date of Publication** | **DOI of the Publication/ Link to the Publication** | **Evidence Attached (Yes/No)** |
| 1. |  |  |  |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |  |  |  |
| *\*\*Please add more rows and fill off, if there are more than 3 entries*   * ***Name of the Authors*** *– List all authors of the publication in the same order as in the article.* * ***Title of the Article as in the Journal*** *– Provide the exact title of the article as it appears in the journal.* * ***Name of the Journal*** *– Mention the full name of the journal where the article was published.* * ***Indexed / Not Indexed*** *– Indicate whether the journal is included in a recognized indexing service.* * ***Name of the Indexing Service*** *– Specify the indexing database (e.g., Scopus, Web of Science, PubMed).* * ***Author Contribution (First/Second/Corresponding Author)*** *– Specify the applicant’s authorship role in the publication.* * ***Published / Pending*** *– State whether the article is already published or still awaiting publication.* * ***Date of Publication*** *– Provide the official publication date (or acceptance date if pending).* * ***DOI of the Publication / Link to the Publication*** *– Give the DOI or a valid online link to the article.* * ***Evidence Attached (Yes/No)*** *–* ***Please attach the front page of the Journal article*** *which showcase the necessary information as evidence* | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **21. Please enter information on Conference Publications** | | | | | | | | | | |
| **No.** | **Name of the Authors** | **Title of the Article as in the Conference Paper** | **Name of the Conference** | **Indexed/ Not Indexed** | **Name of the Indexing Service** | **Author Contribution (First/Second/**  **Presenting Author)** | **Full Paper**  **/Abstract** | **Date of Publication** | **DOI of the Publication/ Link to the Publication** | **Evidence Attached (Yes/No)** |
| 1. |  |  |  |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |  |  |  |
| *\*\*Please add more rows and fill off, if there are more than 3 entries*   * ***Name of the Authors –*** *List all authors of the paper in the same order as in the conference proceedings.* * ***Title of the Article as in the Conference Paper*** *– Provide the exact title of the paper as it appears in the proceedings.* * ***Name of the Conference –*** *Mention the full name of the conference where the paper was presented/published.* * ***Indexed / Not Indexed –*** *Indicate whether the conference proceedings are included in a recognized indexing service.* * ***Name of the Indexing Service –*** *Specify the indexing database (e.g., Scopus, Web of Science).* * ***Author Contribution (First/Second/Presenting Author)*** *– Specify the applicant’s authorship role in the publication.* * ***Full Paper / Abstract –*** *State whether the submission was a full paper or an abstract.* * ***Date of Publication –*** *Provide the official date of publication or presentation.* * ***DOI of the Publication / Link to the Publication –*** *Give the DOI or a valid online link to the paper.* * ***Evidence Attached (Yes/No) – Please attach the front page of the Journal article*** *which showcase the necessary information as evidence.* | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **22. Please enter information on Books / Book Chapters / Monographs** | | | | | | | | | |
| **No.** | **Type (Book/Chapter**  **/Monograph)** | **Name of the Authors** | **Title of the Book/ Book Chapter/Monograph** | **Name of the Publisher** | **Indexed/ Recognized** | **Date of Publication** | **Authorship (First/Second/Co-/Corresponding)** | **DOI of the Publication/ Link to the Publication** | **Evidence Attached (Yes/No)** |
| 1. |  |  |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |  |  |
| *\*\*Please add more rows and fill off, if there are more than 3 entries*   * ***Type (Book/Chapter/Monograph)*** *– Indicate whether the entry is a full book, a book chapter, or a monograph.* * ***Name of the Authors*** *– List all authors in the same order as they appear in the publication.* * ***Title of the Book / Book Chapter / Monograph*** *– Provide the exact title as it appears in the publication.* * ***Name of the Publisher*** *– Mention the full name of the publishing organization or company.* * ***Indexed / Recognized*** *– State whether the publication is listed in a recognized indexing service or holds publisher-level recognition.* * ***Date of Publication*** *– Provide the official publication date.* * ***Authorship (First/Second/Co-/Corresponding)*** *– Specify your role in authorship as listed in the publication.* * ***DOI of the Publication / Link to the Publication*** *– Give the DOI or a valid online link to the work.* * ***Evidence Attached (Yes/No)*** *–* ***Please Attach the front page or necessary pages of the book/chapter*** *which showcases the necessary information.* | | | | | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **23. Please enter information on Reviewing & Editorial Roles** | | | | | | | |
| **No.** | **Type (Journal /Grant/ Book/Other)** | **Title of the Journal / Grant / Book being reviewed** | **Year** | **Specify the Role Performed (Reviewer / Editorial Board / Guest Editor)** | **If it’s a Journal, State Whether its Indexed or Not Indexed** | **Name of the Indexing Service** | **Evidence Attached (Yes/No)** |
| 1. |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |
| *\*\*Please add more rows and fill off, if there are more than 3 entries.*   * ***Type (Journal/Grant/Proposal) –*** *Indicate whether the role relates to a journal, a grant application, book, or other.* * ***Title of the Journal / Grant / Proposal Reviewed –*** *Provide the exact title of the journal/book or the name/identifier of the grant reviewed.* * ***Year –*** *State the year in which the reviewing or editorial activity took place.* * ***Specify the Role Performed (Reviewer / Editorial Board / Guest Editor)*** *– Clearly mention the role you performed in the process.* * ***If it’s a Journal, State Whether it’s Indexed or Not Indexed –*** *For journal-related roles, indicate if the journal is listed in a recognized indexing service.* * ***Name of the Indexing Service –*** *If applicable, specify the indexing database (e.g., Scopus, Web of Science, PubMed).* * ***Evidence Attached (Yes/No) – Please Attach an acceptable document of evidence*** *which showcases the necessary information. (e.g., invitation letter, reviewer acknowledgment, editorial certificate).* | | | | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **24. Please enter information about Awards / Orations / Fellowships** | | | | | | |
| **No.** | **Type (Award/**  **Oration/Fellowship)** | **Title of the Award/Oration/Fellowship** | **Name of Awarding Body** | **Level (National/International)** | **Year** | **Evidence Attached (Yes/No)** |
| 1. |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |
| *\*\*Please add more rows and fill off, if there are more than 3 entries*   * ***Type (Award / Oration / Fellowship) –*** *Indicate whether the entry refers to an award, oration, or fellowship.* * ***Title of the Award / Oration / Fellowship –*** *Provide the official title as it appears on the certificate or announcement.* * ***Name of Awarding Body –*** *State the full name of the organization, institution, or body that conferred the recognition.* * ***Level (National / International) –*** *Specify whether the recognition was at the national or international level.* * ***Year –*** *Mention the year in which the award, oration, or fellowship was received.* * ***Evidence Attached (Yes/No) – Please attach the copy of offer letter*** *or any other document of evidence which showcase the necessary details.**(e.g., certificate, award letter, program booklet).* | | | | | | |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **25. Please enter information about the Patents & Certificates for Inventors** | | | | | | | | | |
| **No.** | **Type (Patent or Certificate for Inventors)** | **Title of the Patent / Certificate** | **Patent Awarding Body** | **Inventorship Role (Lead Inventor/Co- Inventor)** | **Year Granted** | **Commercialized (Yes/No)** | **Link to Patent Webpage** | **Is SLTC a direct Beneficiary? (Yes/No)** | **Evidence Attached (Yes/No)** |
| 1. |  |  |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |  |  |
| *\*\*Please add more rows and fill off, if there are more than 3 entries*  *\*\*Entries to the section will be essential to be considered for the award of Best Inventor – Staff Category*   * ***Type (Patent or Certificate for Inventors)*** *– Indicate whether the entry refers to a patent or an inventor’s certificate.* * ***Title of the Patent / Certificate*** *– Provide the official title of the patent or certificate as registered or awarded.* * ***Patent Awarding Body*** *– State the authority, organization, or institution that granted the patent or certificate including the host country.* * ***Inventorship Role (Lead Inventor / Co-Inventor)*** *– Specify your role in the invention (e.g., lead inventor, co-inventor).* * ***Year Granted*** *– Mention the year in which the patent or certificate was officially granted.* * ***Commercialized (Yes/No)*** *– Indicate whether the invention has been successfully commercialized.* * ***Link to Patent Webpage*** *– Provide the official webpage link to the published patent (e.g., in WIPO, USPTO, NIPO databases) if available.* * ***Is SLTC a Direct Beneficiary? (Yes/No)*** *– Confirm whether SLTC directly benefits from the patent (e.g., through ownership, royalties, or rights).* * ***Evidence Attached (Yes/No)*** *–* ***Please attach a copy of the registered patent certificate****/ or any other document of evidence showcasing the necessary details. (e.g., patent certificate, official listing, commercialization agreement).* | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **26. Please enter information the National or International Grants you have achieved** | | | | | | | | | | |
| **No.** | **Grant Type (Research Grant/ Other)** | **National**  **/International** | **Grant Awarding Body** | **Tile of the Project** | **Role (PI/Co-PI/Member)** | **Year Awarded** | **Grant Amount**  **(LKR)** | **Link to Grant Webpage** | **Is SLTC a direct Beneficiary? (Yes/No)** | **Evidence Attached (Yes/No)** |
| 1. |  |  |  |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |  |  |  |
| *\*\*Please add more rows and fill off, if there are more than 3 entries*   * ***Grant Type (Research Grant / Other) –*** *Specify whether the grant is a research grant or another type of funding support.* * ***National / International –*** *Indicate whether the grant was awarded at the national or international level.* * ***Grant Awarding Body –*** *Provide the name of the funding agency, institution, or organization that awarded the grant.* * ***Title of the Project –*** *State the official title of the funded research project.* * ***Role (PI / Co-PI / Member) –*** *Mention your role in the project, such as Principal Investigator (PI), Co-Principal Investigator (Co-PI), or team member.* * ***Year Awarded –*** *Specify the year in which the grant was awarded.* * ***Grant Amount (LKR) –*** *State the total value of the grant in Sri Lankan Rupees.* * ***Link to Grant Webpage –*** *Provide the official webpage or online reference link for the grant, if available* * ***Is SLTC a Direct Beneficiary? (Yes/No) –*** *Confirm whether SLTC directly benefits from the grant (e.g., through funds received, infrastructure, or institutional support).* * ***Evidence Attached (Yes/No) – Please attach an acceptable document of evidence*** *which showcases the necessary information.* ***(e.g., award letter, contract, or official grant notification).*** | | | | | | | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **27. Please enter information the Research Supervision** | | | | | | |
| **No.** | **Type of Supervision (PhD/MPhil/**  **MSc/MBA/UG)** | **Affiliated Institute** | **Year of Supervision Completed** | **No of Students Supervised** | **Role (*Main Supervisor / Co-Supervisor / Advisor)*** | **Evidence Attached (Yes/No)** |
| 1. |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |
| *\*\*Please add more rows and fill off, if there are more than 3 entries*  *\*\*You may create separate entries according to the year of supervision and type of supervision as necessary*   * ***Type of Supervision (PhD/MPhil/MSc/MBA/UG) –*** *Specify the level of research supervision (e.g., PhD, MPhil, MSc, MBA, Undergraduate).* * ***Affiliated Institute –*** *State the university or institution where the supervision took place. (Preference is on SLTC Affiliations)* * ***Year of Supervision Completed –*** *Mention the year in which the supervision was formally completed.* * ***No. of Students Supervised –*** *Provide the total number of students supervised under this category.* * ***Role (Main Supervisor / Co-Supervisor / Advisor) –*** *Indicate the role you played in the supervision process.* * ***Evidence Attached (Yes/No) – Please attach an acceptable document of evidence*** *which showcase the necessary details if available.* ***(e.g Completion letters, thesis submission acknowledgments, official university certification, etc)*** | | | | | | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **28. Please enter information on Industry Collaborated Research Projects** | | | | | | | | |
| **No.** | **Project Title** | **Partner Industry/Organization** | **Year of Completion** | **Type of Project (UG or PG Research /Other)** | **Role (PI/Co-PI/Member)** | **Outcome (IP Created**  **/Technology Transferred/**  **Commercialized)** | **Is SLTC a direct Beneficiary? (Yes/No)** | **Evidence Attached (Yes/No)** |
| 1. |  |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |  |
| *\*\*Please add more rows and fill off, if there are more than 3 entries*   * ***Project Title –*** *State the official title of the collaborative project as recognized by SLTC or the partner organization.* * ***Partner Industry/Organization –*** *Provide the full name of the industry or external organization involved in the collaboration.* * ***Year of Completion –*** *Indicate the year in which the project was formally completed.* * ***Type of Project (UG or PG Research/Other) –*** *Specify whether the collaboration was linked to undergraduate research, postgraduate research, or another type of project.* * ***Role (PI/Co-PI/Member) –*** *Clearly state your role in the project (e.g., Principal Investigator, Co-Investigator, or Team Member).* * ***Outcome (IP Created/Technology Transferred/Commercialized) –*** *Describe the key outcome(s) of the collaboration, such as intellectual property creation, successful technology transfer, or commercialization.* * ***Is SLTC a Direct Beneficiary? (Yes/No)*** *– Indicate whether SLTC directly benefited from the collaboration (e.g., revenue, infrastructure, research capacity, or reputation).* * ***Evidence Attached (Yes/No) – Please attach an acceptable document of evidence*** *which showcase the necessary details.* ***(e.g., MoU/MoA, project completion certificate, IP certificate, technology transfer agreement).*** | | | | | | | | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **29. Please enter information the Non-Traditional Research Outputs** | | | | | | | | |
| **No.** | **Output Type (Music, Performance, Exhibition, IP, etc.)** | **Title / Name of Work** | **Year** | **National / International Recognition** | **Authorship / Creatorship Role (Lead, Co-Creator, Performer, Director, etc.)** | **Indexed / Registered IP Outcome (Copyright, Trademark, Registration No.)** | **Venue / Platform/ URL Links to the Reference Work** | **Evidence Attached (Yes/No)** |
| 1. |  |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |  |
| *\*\*Please add more rows and fill off, if there are more than 3 entries*  *\*\*Entries to this section will be considered for Best Art and Creativity Award*   * ***Output Type (Music, Performance, Exhibition, IP, etc.) –*** *Specify the category of the output, such as original music, performance, exhibition, or intellectual property.* * ***Title / Name of Work –*** *Provide the official title or name of the creative or scholarly work.* * ***Year –*** *Indicate the year in which the work was completed, performed, published, or registered.* * ***National / International Recognition –*** *State whether the work received recognition at the national or international level (e.g., awards, showcases, reviews).* * ***Authorship / Creatorship Role (Lead, Co-Creator, Performer, Director, etc.) –*** *Clearly define your role in the creation or performance (e.g., lead creator, co-performer, director).* * ***Indexed / Registered IP Outcome (Copyright, Trademark, Registration No.) –*** *Provide details of any official registrations, indexing, or intellectual property recognition related to the work.* * ***Venue / Platform / URL Links to the Reference Work –*** *Mention where the work was presented, performed, or published and provide links if available.* * ***Evidence Attached (Yes/No) – Please attach an acceptable document of evidence*** *which showcase the necessary details.* ***( (e.g., performance program, certificate, screenshots, copyright certificate).*** | | | | | | | | |

**Declaration by the Applicant**

I hereby declare that all information provided in this application is true, accurate, and complete to the best of my knowledge. I confirm that the supporting evidence attached is authentic and corresponds to the details stated in this form. I further declare that I have read and understood the eligibility criteria and competition rules of the SLTC Research & Innovation Awards 2025, and agree to abide by them. I understand that any misrepresentation or omission of information may result in disqualification from the award process.

**Full Name of Applicant :** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Signature :** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Date :** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

-END-