

ELECTION COMMISSION - APPLICATION FOR TRANSFERS

Post	Information & Communication Technology Officer	Class	
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A. Personal details

01. Name in Full:															
02. Name with initials :															
03. Date of birth: (Yr/Mon/Date)	04. Age: (as at 2022.04.30) (Yr/Mon/Days)	05. Sex:													
<table border="1" style="width: 100%; height: 30px;"><tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr></table>				<table border="1" style="width: 100%; height: 30px;"><tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr></table>				Female <input type="checkbox"/>							
		Male <input type="checkbox"/>													
06. National Identity Card Number:	<table border="1" style="width: 100%; height: 30px;"><tr><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td></tr></table>														
07. Private email address:	09. Permanent Address:	10. Temporary Address:													
08. Mobile Phone Number:															
11. Civil Status:	12. If married, name of the spouse :	13. Employment and service station of the spouse :													
Married <input type="checkbox"/>															
Single <input type="checkbox"/>															

B. Service Record

14. Present service station :	15. Are you made permanent in the post?
	yes <input type="checkbox"/>
	no <input type="checkbox"/>
16. District/City where the service station is located :	17. Office T.P. number:

18. Period of service in the present post : (as at 2022.04.30)	19. Have you served in a popular service station before? Yes <input type="checkbox"/> No <input type="checkbox"/>	20. If yes, for how many years?
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	Service Station	Post	Period of Service	
			From	To
21. Previous service stations in the public service:	1			
	2			
	3			
	4			

I have attached photocopies of certificates pertaining to IT training courses followed and to professional qualifications along with a recently compiled CV.

I declare that all the above information is true and correct.

.....

Date

.....

Signature

C. Recommendation of the Head of the Ministry/Department

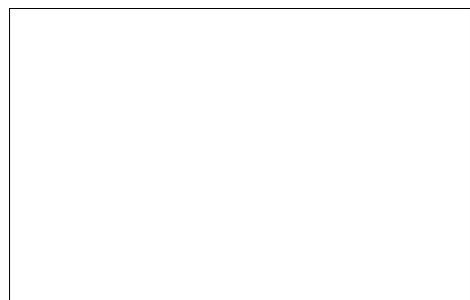
I recommend the transfer request of the officer named above with/without or on providing a replacement later basis. I agree/disagree with the release of the relevant officer within one month from the date of selection by the Interview Board of the Election Commission.

.....

Date

.....

Signature



Note : put v or X where necessary.

Official stamp