Application No :			
(Office Use Only)			

MINISTRY OF PUBLIC SERVICES, PROVINCIAL COUNCILS AND LOCAL GOVERNMENT SRI LANKA INSTITUTE OF DEVELOPMENT ADMINISTRATION



03. PHD



	Applied for	
Personal Det	ails	
01. Full Name	:	
02. Date of Birth	DD MM YYY	03. ID No. :
04. Permanent Addre	ess:	
05. Official Address	:	
06. Date of appointm	ent to the all island services:	DD MM YYY
07. Current Designatio	n:	
08. e- mail address:		
Educational C) walifications	Residence
Educational (Degree	yuanncations Graduated Year	r Name of the University
01. Name of the basic With field		
02. Master's Degree		

01			
02			
03			
04			
> Other Qualifications relevant to the post			
01			
02			
I hereby declare that the above furnished information is correct to the best of my knowledge and bear the responsibility for the correctness. If any of above found false at any stage even after appointment to the post I agree with any type of disciplinary action against me by the authority.			
Date	Applicant		

> Professional Qualification