

Kunyapinya							
POS	FAPPLIED FOR :						
1. Name in full : [Underline Surname]			Dr	./Mr	./Ms		
	If registered as a student in	a University under	any				
	other name. please indicat	te such name wi	ithin				
	prackets]						
2. Pc	stal Address :						
l	Any change should be commu	inicated immediate	ly]				
3. C	ontact Details:						
i. Telephone (residence)							
	ii. Mobile						
	iii. E-mail						
	te of Birth and Age : [Please c irth Certificate]	ittach copy of					
5. Ci	vil Status :						
6. Na	ational Identity Card Number	:					
7. WI	nether a Citizen of Sri Lanka [State whether by					
	escent or by registration: if by						
give reference number and date of certificate of							
ci	tizenship]						
8. Educational Qualifications :							
8.1 School Education							
	School/s Attended					From	То
i.							
ii.							
iii.							
iv.							
v.							
8.2	University Education –Underg	raduate and postgra	aduate				
	Name of the University	Degree/Diploma	Course		Result	From	То
			Followe	ed	Class		
<u>i.</u>							
ii.							
iii.							
iv.							
V.							
vi.							
9. Pr	ofessional Qualifications						
i.							
ii.							
iii.							
iv.	1						

10. Academic distinctions, scholarships, Medals, Prizes etc. [Indicate the institution from which such awards have been obtained - Please attach copies of all relevant certificates]									
	Award				Institution				
1.									
2.									
3.									
4.									
11. Proficiency of Languages [Indicate the institution from which such awards have been obtained - Please attach copies of all relevant certificates]									
	Language			Highest Examination passed					
1.	Sinhala								
2.	Tamil								
3.	English								
4.	Other (Specify)								
12.	(a) Present Occupation	n and Sala	ry Drawn						
Institution				Occupation				Salary drawn	
	(b) Previous employment	ents with	dates						
	Institution		Post From To			F	Reasons for leaving		
1.									
2.									
3.									
4.									
5.									
6.									
13.	Administrative/Financ	ial/any o	ther releva	nt Ex	xperien	ce, if any	/		
14. Particulars of Bond Obligations to Higher Educational Institutions/Institutes if any:									
	Institution			Obligatory Service period				Bond amount due	
1.									
2.									
3.									
4.									

15. Commendations/Punishments during your career yes	
If yes, please provide details	
16. Extra-Curricular Activities	
17. Any other relevant particulars (Not included above)	
18. Have you ever been convicted by a court of law? yes No	
If yes please provide details	
	3 P a g e

19. Names of two Referees [With address]

Name	Address	Telephone Number
1.		
2.		

20. I hereby certify that the particulars submitted by me in this application are true and accurate. I am aware that any of these particulars are found to be false or inaccurate I am liable to be disqualified before selection and to be dismissed without any compensation if the inaccuracy is detected after appointment.

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Date

Signature of Applicant

[TO BE COMPLETED BY THE HEAD OF THE INSTITUTE WHERE APPLICABLE]

Director, University College Kuliyapitiya.

Application forwarded. Please note that if selected, action will be taken to release him/ her from service.

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Date

Signature of Head of Institution