Application	for the	post	of Provincial	Director	to the	Departmen	t of A	Animal	Production	and Health	of
		-		Central I	Provinc	ial Council					

1.	Name with initials: Mr./Mrs./Miss	
2.	I. Present Post:	
	II. Service and Grade:	
	III Present work station & address:	
3.	Personal address:	
4.	Sex	:
5.	I.Date of Birth	:
	II.Age as at 02.02.2024	:
6.	National Identity Card No	:
7.	Contact No. I. Personal:	II. Official:
8.	Date of promotion to Sri Lanka An	imal Production and Health Service Grade I:

10. Educational qualification in the field related to the post

No order	Doctor of Philosophy/ Post-Graduate degree/ Post- Graduate Diploma	Institute offered	Year

11. Details relating to the period of service from the date of first appointment to/2024

Service Station	Post held	Period		
Service Station	i üst neta	From	From	

12. Annual Performance Appraisals

Details on rating obtained in performance appraisal during the period of five years immediately prior to the closing date of application (cross off irrelevant words)

Year	Rating obtained in performance appraisal
2019	Excellent / Above average / Satisfactory
2020	Excellent / Above average / Satisfactory
2021	Excellent / Above average / Satisfactory
2022	Excellent / Above average / Satisfactory
2023	Excellent / Above average / Satisfactory

13. Other qualifications

I. Awards

(As mentioned in Para. 02.5.1 of the Marking Criteria published on the website)

Details of the awards (related to which matter)	Whether Provincial/ national/ international awards	Institution offered

II. Commendations -

(Marks will be awarded only for commendations made in "General 230 b" form)

Commendations received	Commendations received		Field of work to which this
	From whom	Which year	commendation was received

III. Publications

Details on publications mentioned under paragraphs of 02.5.3/02.5.4 in the Marking Criteria published on the website

Publications	Relevant category

I do hereby certify that no any disciplinary inquiry is being held against me, not subjected to any disciplinary punishments for the offences mentioned in the Schedule I & II of Establishment Code Volume II within a period of five years immediately preceding the closing date of applications and all information furnished by me in this application is true and correct.

Date: -

Signature of the applicant

I do hereby certify that information furnished by Mr./Mrs./ Miss. is true as per relevant officer's personal file, he/she has earned all the salary increment on/.../2024 within the immediately preceding 05 years and this officer has not subjected to any disciplinary actions and not anticipated to hold inquiry in future. He/She could be released from current post if selected for this post.

Date: -

.....

Signature of the Head of Department Name (Place official stamp)

Recommendation of the Secretary to the Ministry

I do/ do not recommend the above application.

Date :

.....

Signature of the Secretary of the Ministry Name (Place official stamp)

Recommendation of Chief Secretary of the Province (only for officers who have been absorbed to Central Provincial Council)

I do/ do not recommend the above application.

Date :

.....

Signature of Provincial Chief Secretary Name (Place official stamp)