Ministry of Agriculture and Plantation Industries Coconut Cultivation Board



9/428 Dencil Kobbekaduwa Mawatha, Battaramulla (Tel. 0112861331)



(For Official use only)	

Specimen Application for the Assistant Manager (Estate) (CMG) JM1-2 (Contract Basis)

1.1 Personal Information:
1.1 Name with Initials at the end in English Capital
Letters
(Ex: SILWA A.B.K.)
1.2 Name in Full in English Capital Letters:
1.3 Name in Full (In Sinhala / Tamil):
1.4 Personal Address (In Sinhala / Tamil):
1.5 Personal Address (In English Capital Letters):
1.6 Gender:
1.7 Marital Status:
1.8 Ethnicity:
1.2 National Identity Card No.:-
1.3 Date of Birth :- Year Month Date
1.4 Telephone No.:-
1.5 District:
1.6 1.13 Electorate:
1.7 1.14 Grama Niladhari Division:
1.8 1.15 Email Address :

2.0 Higher	· Educational	Qualifications
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University / Institution	Professional Course	Date of Award	Class

3.0 Details regarding various Posts and Service Periods

	From			То		Name and Address of	Post Held	Service category	
	Date	Month	Year	Date	Month	Year	the Employer		post belong *
1									
2									

^{*}Employees service periods with Government Department/ Government Statutory institutes should be mentioned the Service category that the post held was belong (E.g. Senior Managerial (HM) Managerial (MM) Junior Managerial (JM).

4.0 Professional Qualifications:

Professional	University / Institution	Professional	Date of Award
Qualifications		Course	

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5.0 Other Qualifications:			
6.0 Details regarding two non-related	l Referees:		
Name	Tel	ephone No.	Position Address
7.0. Certification of the Applicant:			
I hereby certify that the information ${\mathfrak g}$	given above is t	rue and correct.	
			cure of Applicant
8.0 Attestation:			
I hereby certify that Mr. / Mrs. / Miss			
who submits this application is perso			
Date: in my presence.			
Signature of the Attestor			
Name:			
Position:			

9. Certification of the Head of the Department / Ministry if the applicant is an employee of the Central Government or the Provincial Government service:
I am forwarding the application of Mr. / Mrs. / Miss
I wish to inform that he / she is serving in this ministry / department as a permanent / temporary / trainee / casual officer and if he / she is selected for the above post he / she can / cannot be released. (Strike off unnecessary words)
Signature of the Head of the Department / Ministry / Authorized Officer and the Official Stamp
Date :
Name:
Position:
Ministry / Department :