Office Use Only

Application No.

Qualified	
Unqualified/ Doubtful	

#### AIRPORT & AVIATION SERVICES (SRI LANKA) (PRIVATE) LIMITED BANDARANAIKE INTERNATIONAL AIRPORT, KATUNAYAKE

#### **APPLICATION FOR THE POST OF ASSISTANT MANAGER – HUMAN RESOURCES**

1	Title : M	Ir Mrs Miss				
	Last Name: Initials with Last Name					
	Full Name as in NIC (In Block Letters)	: 				
	Other Names :					
2	Gender: Ma	Date of Issue:   Date   Date   Date   Date   Month   Year   Date   Month   Year   Date   Month   Year   Month     Year   Month     Year   Month     Year     Month     Year     Month     Year     Month     Year     Month     Year     Month     Year     Month     Year     Month     Year     Month     Year     Month     Year     Month     Year     Month     Year     Month     Year     Month <				
3	<b>Contact Details</b> Permanent Address	:				
	City/Town:	Postal Code :				
	Telephone Numbers Home:	Mobile No:				
		E-Mail:				
	District :	Province :				

(<u>Important</u> -. Further correspondent will be made to you via your Email address. Therefore, your Email address should be mentioned correctly and legibly)

## Academic Qualifications (Copies of certificates should be attached) G C E (O/L)

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	G C L (O/L)			
5	Subject	Grade	Index No	Year

## GCE(A/L)

6	Index No :		Year :	
	Subject	Grade	Subject	Grade

# University Education (Degrees, Diplomas etc.)(*Copies of certificates should be attached*)

7	Name of the Degree/	University/ Institution	Per	iod	Field of Degree	Results (indicate	Effective Date
	Diploma		From (dd/mm/yyyy)	To (dd/mm/yyyy)	-	Class or Grade)	

## Postgraduate Qualifications (Postgraduate Diplomas, Master Degrees, Ph.D. etc.) (*Copies of certificates should be attached*)

8	Name of the Degree/ Postgraduate Diploma	University/ Institution	Per	iod	Subject Area/s	Effective Date
			From	To (dd/mm/yyyy)		
				(dd/mm/yyyy)		

## **Professional Qualifications (Examination/Memberships of Professional Bodies (Associate/Corporate Membership etc.) (***Copies of certificates should be attached***)**

9	Institution	Name of the Examination/Membership	Membership Category	Effective Date

#### Training Programmes/Workshops/Seminars/Conferences participated: (Copies of certificates should be attached)

10	Name of the Training Programme/Workshops etc.	Institution	Period

	11	Special Achieveme	nts
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#### **Employment History**

(a) Present Post:(*Copy of Service certificate or Appointment Letter should be attached*)

12	Post	Institution	Per	iod	Describe the work done
			From (dd/mm/yyyy)	To (dd/mm/yyyy)	

#### (b) Previous Employment

#### (Copies of Service certificates or Appointment Letters should be attached)

Post	Institution	Period		Total Service
		From (dd/mm/yyyy)	To (dd/mm/yyyy)	

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#### Working Experience

Please explain the key responsibilities handled under each position mentioned above in part (b) in brief

## **Extra Curricular Activities:**

14	Category	Туре	Achievement	Date/Year

#### Details of two non related referees:

15	No.	Name & Position	Official Address & Tele. Nos.	Residential Address & Tele. Nos.

I hereby certify that the particulars submitted by me in this application are true and accurate. I am aware that if 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.

#### Signature of the applicant:

Date: