THE CONSTITUTIONAL COUNCIL

Appointment of members to the National Commission on Women

Instructions

- 1. Please use block capitals throughout this form if not typewritten.
- 2. If the space provided is insufficient for the particulars required, such particulars may be given in a separate schedule(s) with appropriate reference to such accompanying schedules and such schedules should also be signed.
- 3. The Part I of the form should be completed by the nominating authority
- 4. The Part II of the form should be filled by the nominee and attested as required in the last page of the form
- 5. Duly completed documents can be submitted by registered post or by email by the nominating authority.
- 6. If nominations are submitted by email, the duly completed original document should be scanned and emailed. The scanned document should be clear and fit for print.

PART I - (To be completed by the nominating authority)

I / We hereby nominate	hereby nominate that	
of	ational Commission on Wo	men to be constituted under the Women
Official Seal	Date	Signature
PART II – To be filled l	by the nominee	
1. Personal Info	ormation	
1.1. Last Name:		
1.2. Other names in full:		
1.3. Full name in English	Block Capitals:	
1.4. Preferred/Commonly	Used Name:	
1.5. Gender		
1.6. Ethnicity		
1.7. Religion (if relevant)	·	

1.8. Ac		
a)		
b)		
٥,		······································
	mail ID:	
	Felephone No:	
	Official	
	Private	
c)	Mobile	
1.11. I	Date of Birth:	
1.12. <i>A</i>	Are you a Sri Lankan Citizen: YES/NO	
	Are you a dual citizen: YES/NO	
		try (other than Sri Lanka) you are a citizen of,
	e date on which you received such citizer	isnip:
1 15 N	NIC Number	
1.15.1	Trumber	
2.	Family Information	
		ed Divorced Separated Single
	1	
2.4. Er	nployer of Spouse:	
2.5 A ₁	re you or your snouse a member of any n	olitical party? (Tick) Yes No
	ames of children and their professions/oc	± • · · · · · · · · · · · · · · · · · ·
Name o	f child	Profession/occupation

3. Educational and Professional Qualifications

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()	Λ	amic
(a)	Acad	

Examination passed	Date	Institution
	,	

(b) Professional:

Qualification obtained	Date	Institution	

4. Employment History

Employment: (List most recent to earliest)

Period	Post Held	Employer/Dept/Organization
From-To		

5. Personal History

5.1. Have you been convicted of any offence? (Tick) Yes No
5.2 Have you served a sentence of imprisonment imposed by any Court in Sri Lanka or any other country or are you serving of a sentence of imprisonment imposed by any Court in Sri Lanka or any other country? (Tick) Yes No
5.3. Do you have any pending litigation against you before any Court of Law? (Tick) Yes No
5.4. Have you been adjudged an insolvent? (Tick) Yes No
5.5. Conflicts of interest: Indicate any investments, contracts, obligations, liabilities, promises, undertakings or
relationships you or your spouse or any of your children may have which conflicts or which may be reasonably perceived to conflict with your duties as an independent member of the National Commission on Women

6.	Eligibility
the Nation public lif legislation	(3) of the Women Empowerment Act No. 37 of 2024 stipulates that the members of nal Commission on Women shall be persons having distinguished themselves it with proven knowledge, experience and eminence in the fields of law on, trade unionism, management and administration, economic development, health, empowerment of women or have committed to increase the employment potention.
6.1. Which in?	h of the aforementioned fields do you have knowledge, experience and eminence
eminence <i>This ma</i> y	in your respective field or profession. or include membership of professional fraternal, civil, charitable or other
eminence This may organizati publicatio National/I	any and all relevant information that demonstrates your knowledge, experience an in your respective field or profession. or include membership of professional fraternal, civil, charitable or other ions (list offices held with dates), publications (title, publisher, place and date of the con), conferences attended (name, place, date and capacity in which you attended Professional/Academic/ Other Honours, Awards, Distinctions (with dates of the content of the professional of the pro
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eminence This may organizate publicatio National/I awards)	in your respective field or profession. in include membership of professional fraternal, civil, charitable or other ions (list offices held with dates), publications (title, publisher, place and date of the control

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		Signatura
Jale		Signature
(To be completed by a	Justice of Peace/ Commissione	er of Oaths/ Attorney-at-Law/ Notary
Public)		,
	cincout the new	ne of the nominee>
I hereby certify that	····· < msert the nam	ne of the nonlinees
		is/ her sign before me on < date>