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(For office use )

**Specimen Application Form**

**Open Competitive Examination for Recruitment to the Posts in Supervisory Management Assistant  
Technological Service Category (MN-03-2016) of the Department of Archaeology under the State  
Ministry of Buddhasasana Religious and Cultural Affairs – 2024/2025**

**Medium of Language applied**

Sinhala - 2 , Tamil - 3, English - 4

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(Write the relevant number in the cage)

**Post / Posts applied for**

1. Technical Officer (Conservation Assistant)
2. Archaeological Photographer

Selection 1	
Selection 2	

(Write the relevant number in the cage)

- 1.0 1.1 Name in Full : .....  
(In English Block letters) .....
- 1.2 Name in Full : .....  
(in Sinhala / Tamil) .....
- 1.3 Name with Initials : .....  
(in Sinhala / Tamil) .....
- 1.4 Name with Initials : .....  
(In English Block letters) .....

- 2.0 2.1 Permanent Address : .....  
(In English Block letters)  
(Admission will be posted to this address.).....

- 2.2 Permanent Address : .....  
(in Sinhala / Tamil) .....

- 3.0 Gender : 

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 Male - 0 Female - 1

- 4.0 National Identity Card Number : 

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- 5.0 Phone Number : Mobile - 

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- Fixed - 

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- 6.0 6.1 Date of Birth: Year 

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 Month 

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 Date 

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6.2 Age as at 07.07.2025. Years:     Months:   Days:

7.0 Educational and Other Qualifications :

7.1 G.C.E. (Ordinary Level) Qualifications :

Index No. : ..... Year : .....

Serial No.	Subject	Pass
01.		
02.		
03.		
04.		
05.		
06.		
07.		
08.		
09.		
10.		

7.2 G.C.E. (Advanced Level) Qualifications :

Index No. : ..... Year : .....

Serial No.	Subject	Pass
01.		
02.		
03.		
04.		

7.3 Professional Qualifications :

University / Institute	Course Studied	Date of Validity	Pass

8.0 Have you ever been convicted for any offence in a Court of Law ?  
( Put the ✓ mark in the appropriate cage. If yes, the details may be mentioned.)

Yes

No

.....

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Receipt obtained by paying examination fees may firmly be affixed here as not to fall.

9.0 Declaration of Applicant :

I hereby certify that the particulars furnished by me in this application are true and accurate and all the parts herein have been correctly completed. I am also aware that if any particulars contained herein are found to be false and incorrect, before selection. I am liable to be disqualified and to dismiss from service if any inaccuracy is detected after the appointment and I abide by all the rules and regulations. Further, I declare that I will subject to the rules and

regulations, imposed by the Commissioner General of Examinations regarding the holding of examination and the issuance of results.

Date : .....

.....,  
Signature of Applicant.

10.0 Attestation of the Signature of Applicant :

I, do hereby certify that Mr. / Mrs. / Miss. .... who submits this application is personally known to me, he / she placed his / her signature before me on..... , he / she has made the payment of relevant examination fees and the receipt of the same has been affixed herein this application.

Date : .....

.....,  
Signature of the Attesting Officer.

Name of the Attesting Officer : .....

Designation : .....

Address : .....

(Attestation may be verified by placing the official frank.)

06-44/1

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