

UNIVERSITY COLLEGE RATMALANA

APPLICATION FOR THE POST OF

01	Name in Full:									
02	Name with Initials:									
03	Permanent Address:									
04	Tel: Mobile:									
	Fax: Email:									
05	National Identity Card	No:								
06	Date of Birth: Year: Month: Day:									
07	Age as at closing date of Applications: Years: Months: Days:									
08	Civil Status:									
09	Citizenship:									
10	Details of Secondary Education									
	(i) G.C.E (O/L)									
	Name of School/College	Year	Subject	results	Subject	Results				

	(ii) G.C.E. (A/L)											
	Name of Year School/College			Subject			results		Subject		Results	
11	First Dagrae and	Doct	graduata	Dogra	0 (0)							
11	First Degree and	POSI	graduate	Degre	e (s)							
	University/ D Institution		Degrees Class		ass	Special or General Degree		Main Subject/ Subjects	Fro	From – To		fective date f the Degree
12	Professional Qualification											
	Institution Exar			nation passed			Specialization			Year of Passing		
13	Certificates (if a	ny)										
	Course/Certificate Field						Name of the institution/University			Year		
				· · · · · ·								

14	Any other A Scholarship (Indicate th	os, Medals ne institut	s, Prizes, et ion form w	c.					
	awards hav	e been o	btained)						
15	Research & is insufficie	nt, please							
	of same siz	e)							
16	Current Em	ıploymen [.]	t Record						
	Post	ı	gnation	Institution	F	Brief Description of		Time	e Period
	1 030	3.63.6	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	mocreacion		Duties	Fro		То
17	D						• • .		1)
17									
	Post	Desig	gnation	Institution	E	Brief Description of Duties	Fro		e Period To
						2 0.0.00	110	····	10

18	Proficiency in Languages (Please Mark ' $$ ' in the relevant cage)											
	Written				Spoken							
	Language	Very	Good	Satisfact	Week	Very	Good	Satisfactory	Week			
		good		ory		good						
	Sinhala											
	Tamil											
	English											
	Other											
19	Computing 8	& Informa	tion Tech	nology								
	Qualification	1	Institut	ion	Skills gaine	ed	Year	Year				
20			<u> </u>									
20	Leadership/	managem	ent exper	ience								
21	Extra-Curric	ular activi	ties									
22	C:- C -: -											
22	Special Skills	5										
23	Creativity (ir	ncluding p	atents)									
			•									
24	Are you under any obligatory National Service (If yes, specify):											
25	If selected v	what is the	e earliest	date that vo	u can assume	duties.						
23	ii selected, t	viide is en	carnest	date that ye	a can assame	adties.						
26	Names of two persons (with addresses) to whom reference can be made											
	Name				Addres	SS						

I hereby declare that the particulars furnished by me in the application are true and accurate. I am also aware that if any particulars herein are found to be false or incorrect, I am liable to disqualification if the inaccuracy is discovered before the selection and dismissal without any compensation if the inaccuracy is discovered after the appointment.
Signature of Applicant Date
For Public Sector Candidates
Application for the post ofsubmitted bysubmitted bysis forwarded herewith. If he /she is selected for the said post he/she can/cannot be released.
Signature of the Head
Date: of the Institution
(Please place official seal of the Head of Institution)
Note
If the Sheets above are not sufficient, please use extra sheets, wherever necessary.
Mention the list of documents attached along with the form.
(a)
(b)
(c)
(d)
Please mark with ""in the relevant cage, if you do not have something to mention.