

University of the Visual and Performing Arts Form of Application

(Only for post for the Career Guidance Counsellor)

Post Applied for -		
Centre/Unit		
01.Name in Full		
02 Whether Mr. /Mrs. /Miss.		
03. Postal Address & Telephone No. (Any changes should be communicated immediately)	E mail :	Tel No :
04. Date of Birth	Age as at closing date of Appl Years Months Days	ication
05. Civil Status Married	06. National Identity Card No.	
Unmarried		

07. State whether Citizen of Sri Lanka by Descent or Registration. (If by Registration: Give Registration No.)				
(If by Registration; Give Registration No.)				
00 H :				
08. University Education				
Name of the Degree and Name of the University	Whether Special Degree or General Degree?	Extra Subjects	Effective Date and Results (Give class or Grade)	
	Subject Specialized			
09. <u>Completed Post Graduate</u> <u>Qualifications</u>		L		
(Ö) Name of the Post Graduate Degree :				
(II) Study Field:				
(III) Weather it is with Research or without Research?				
(IV) Duration:				
(V) Effective Date :				
10. (I) Special Qualifications (Professional etc.)				

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10. (II)Experience in the relevant field	
11. Present Occupation, Place of Work &	
Salary Drawn (State whether basic or	
consolidated)	
12. Previous Appointment if any with	
dates	
13. Particulars of Bond Obligations to	
Higher Educational Institutions/	
Government	
I). Obligation Period with	
II). Amount Due	
11). Tilloulle Duc	

cation are true and accurate. I am aware that if any to my selection, my application will be rejected and after my selection, I will be dismissed from service
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and my selection, I will be distillssed Holli service
Signature of Applicant

Designation	:
Date	:
Seal	:

Note: Applicants from Public Service / Corporations/ Statutory Boards/ University System should forward their applications through Heads of respective Institutions with an endorsement to the effect that he/she would be released if selected.