I කොටස : (IIඅ) ඡෙදය - ශීු ලංකා පුජාතාන්තුික සමාජවාදී ජනරජයේ ගැසට් පතුය - 2025.09.20	į
PART I: SEC. (IIA) – GAZETTE OF THE DEMOCRATIC SOCIALIST REPUBLIC OF SRI LANKA – 26.09.2025	
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	Speciman Application
	in the Irrigation Department -2025  oplication for the Open Basis Recruitment to the Post of the(III) in Primary Level Unskilled  Service Category in the Irrigation Department -2025
Language 1 Sinhala Famil	medium in which the interview will be faced:  - 1 - 2
1.0 1.1	Name of the applicant with initials:  (In English Capital letters)
1.2	Name of the applicant with initials:  (In Sinhala/ in Tamil)

	1.3	Name denoted by initials:
	1.4	Name denoted by initials:
	1.5	National Identity Card Number:
	1.6	Gender: (Write the relevant number in the cage) Female 1 Male 2
2.0	2.1	Permanent Address: (In English Capital letters) Permanent Address:
	2.2	Permanent Address:
	2.3	(In Sinhala/ in Tamil) Address to which the admission card should be sent:  (I) (In Sinhala/ in Tamil):
	2.4	(II) (In English Capital letters):  Phone Number: Personal
3.0	3.1	Marital Status: Unmarried-1 Married -2
	3.2	Date of Birth: Write the relevant year in the cage
		Year Month Date
	3.3	Age as at the closing date of applications:
		Year Month Date
	3.4	Are you Sri Lankan by birth? or by registration?
4.0	Educ	cational Qualifications:
	4.1	G.C.E (O/L) Examination:
		I. Year and month of the examination: Year: Month: II. Admission No.:

Subject	Grade	Subject	Grade
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

4.2 G.C.E (O/L) Examination:

Subject Gra  6.  7.  8.  9.  10.  court and which punishment received.
8. 9. 10.
9.
court and which punishment received.
ere.
16.

7.0	Certification	of the	Applicant	:
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- (a) I respectfully declare that the particulars furnished by me in this application are true and correct. I agree to bear any loss that may arise from failure to complete and/or incorrect completion of any information herein. Further I declare that all the information herein has been completed correctly.
- (b) I agree to abide by the rules and regulations imposed regarding the conduct of the interview, and to accept any decision taken to cancel my application, before or after the interview, if I am found to be ineligible under these conditions.
- d

	(c)	I understand that if this statement is proven to be false to be dismissed from service even after appointment.	e, I am liable to be disqualified before the appointment and
	(d)	I will not make changes to any particulars herein sub	sequently.
	Dat	te:	Signature of the Applicant.
8.0	Atte	estation of the Signature of the Applicant:	
	kno	I hereby certify that Mr./Mrs./Miss own to me personally and that he/she placed his/her sig	who submits this application is nature in my presence on
			Signature and Seal of the Attesting Officer.
Nam Desig	e of th gnatio	he Attesting Officer:on:	
9.0		ertification of the Head of the Department/Institution: nly for the applicants who are currently in Government	Service)
	holo abo	ding the post of employed in	
	_		Signature of the Head of Department and Official Seal.
	D	Oate:	

09-295