

**Model Application Form  
Ministry of Environment.**

**Recruitment to the Post of Chief Coast Conservation Inspector of the Department of Coast Conservation and  
Coastal Resources Management**

**For Office use only**

01. Name:

1.1 Name with initials using initials at the end: .....  
 (In English Block letters, Eg. : SILVA A.B.)

1.2 Name denoted by Initials : .....  
 (In English Block letters)

1.3 Full Name (In Sinhala) : .....  
 .....

02. 2.1 Personal Address :.....  
 .....

2.2 Official Address :.....  
 .....

2.3 Corresponding Address :.....  
 .....

2.4 Telephone Number : .....

03.

3.1 Date of Birth : Year:     Month:   Date:

(A copy of the Birth Certificate is attached.)

3.2 Age as at the closing date of the applications : Years. : ..... Months: ..... Days : .....

3.3 National Identity Card No : 

--	--	--	--	--	--	--	--	--	--	--	--

04. 4.1 Gender : Female 

--

  
Male 

--

4.2 Civil Status married/Un married /widowhood : Married 

--

  
Un Married 

--

  
Widowhood 

--

05. Date of first Appointment to the Post of Coast Guard : .....

06. Date of first Appointment to the Post of Coast Conservation Inspector : .....

07. Date of Completion of the 05 years of satisfactory and active period of service in the post of Coast Conservation Inspector :- .....

08. Educational Qualifications : (Put the Mark ✓ )

	Name of the Degree	Institution	Year
Postgraduate Degree			
Postgraduate Diploma			
Degrees			

09. Professional Qualifications :

Professional qualifications obtained	Institution	Duration

10. I hereby certify that all the information furnished by me in this application is true and correct. I understand that if any of the information mentioned herein is found to be false before my selection for this post, I will be disqualified and if it is found to be false after my selection, I will be liable to be dismissed from service without any compensation.

date : .....

.....,  
signature of the Applicant.

**Should be completed by the Head of the Department.**

01. Do you subject to the Disciplinary punishment in accordance with the provisions of the Public Service Commission Circular No. 01/2020 ? Yes / No

02. If the answer is “Yes” what is the action take in this regard ? .....

.....  
.....

03. Has the Officer obtained No-pay leave during the period if service ? Yes / No

04. If the answer is “Yes” how many no-pay leaves were taken ?

Serial No.	The Condition applicable for the approval of the leave	Time Duration	
		From	To
i.	V: 2:5:4 < of the Establishment Code		
ii.	XII: 16 < of the Establishment Code		
iii.	Management Services Circular No. 10		
iv.	Management Services Circular No. 33		
v.	XII: 36 < of the Establishment Code		
vi.	Other No pay leave		

The application of Mr. ..... who is serving in this Department and is holding the post of ..... is recommended and submitted.

Date :- .....

.....  
 Signature and the Official Stamp  
 of the Head of the Department.

12-439