

Application for the Post of Project Manager					
Personal Information					
Full Name					
Name with Initial					
Date of Birth		DD	MM	YYYY	Photo
Age (as at the closing date of application, 09.02.2026)		Years & Months			
Gender					
NIC No					
Nationality					
Mobile No					
Personal E-mail					
Permanent Address					
Education Qualification					
Degree (offered by a University /Institution recognized by the university Grants Commission of Sri Lanka)					If available, Please tick the appropriate box below
Possess a Bachelor's degree in IT or related field			(Please specify field)		YES NO
Master's Degree in Project Management					YES NO
Professional Qualification					
Valid Project Management professional certification offered by Project Management Institute, Inc. USA					YES NO
Work Experience					If available, Please tick the appropriate box below
Possess 4-5 years of experience in project management					YES NO
Possess experience in full project lifecycles in software and hardware projects and proven track record in project delivery					YES NO
Current Employment Details					
Name of the organisation		Designation	Duration	Nature of Duty	
Non-Related Reference Details					
Name					
Designation					
Organization					
Mobile					
E-mail					
Declaration					
I hereby confirm that the above-provided information is true, accurate, and complete to the best of my knowledge and belief.					
Signature			Date	DD	MM
				YYYY	