

The Sri Lanka Tourism Development Authority
APPLICATION FORM

Position Applying: Assistant Director/ Procurement

1. Personal Details

1.1 Full Name :

1.2 Name with Initials :

1.3 Date of Birth : 1.4 Age as at 05.03.2026: Y..... M D

1.5 Residence Address :

.....

1.6 Postal Address :

.....

1.7 Mobile No. :

1.8 Residence Tel. No. :

1.9 National Identity Card No. :

1.10 Email Address :

2. Educational Qualifications:

2.1 Bachelor's Degree

| Degree | University/ Institute | Valid Date | Copy of the certificate to be attached |
|---------------|------------------------------|-------------------|---|
| | | | Annexure (...) |
| | | | Annexure (...) |

2.2 Master's Degree

| Master's Degree | University/ Institute | Valid Date | Copy of the certificate to be attached |
|------------------------|------------------------------|-------------------|---|
| | | | Annexure (...) |
| | | | Annexure (...) |

2.3 Doctorate

| Degree | University/ Institute | Valid Date | Copy of the certificate to be attached |
|---------------|------------------------------|-------------------|---|
| | | | Annexure (...) |
| | | | Annexure (...) |

2.4 Diploma/ Higher Diploma/ Post Graduate Diploma

| Diploma/ Higher Diploma/ Post Graduate Diploma | University/ Institute | Duration | | | Copy of the certificate to be attached |
|--|--------------------------|----------|----|----------------------------|--|
| | | From | To | No. of months/ Years | |
| | | | | | Annexure (...) |
| | | | | | Annexure (...) |
| | | | | | Annexure (...) |
| | | | | | Annexure (...) |
| | | | | | Annexure (...) |

2.5 Certificate Courses

| Certificate Course | Institute | Duration | | | Copy of the certificate to be attached |
|-----------------------|-----------|----------|----|----------------------------|--|
| | | From | To | No. of months/ Years | |
| | | | | | Annexure (...) |
| | | | | | Annexure (...) |
| | | | | | Annexure (...) |
| | | | | | Annexure (...) |
| | | | | | Annexure (...) |

3. Professional Qualifications:

| Membership obtained | Institute | Valid Date | Copy of the certificate to be attached |
|---------------------|-----------|------------|--|
| | | | Annexure (...) |

4. Work Experience:

| Years & Months | | Position | Organization | Copy of the certificate to be attached |
|----------------|----|----------|--------------|--|
| From | To | | | |
| | | | | Annexure (...) |

5. Other Skills and Performances:

| | Area of acquired skills/ Performances/ Extra Curricular Activities | Copy of the proof documents to be attached |
|--|---|---|
| | | Annexure (...) |

5. Details of Two Non Related Referees

5.1 Name :

Address :

Contact No. :

Email :

5.2 Name :

Address :

Contact No. :

Email :

I do hereby certify that the above particulars furnished by me are true and correct to the best of my knowledge and forward the same for your kind consideration.

Signature of the Applicant**Date**

**Director General,
Sri Lanka Tourism Development Authority**

Application is recommended and forwarded, Mr./Mrs./Miss. service of the post of and, I certify that the particulars given in numbers 01 to 15 of this application are correct according to the applicant's personnel file and if he/she is selected for the said post he/she can be / cannot be released.

Remarks if any

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Signature of the Head of the Governing Body & Official Stamp