

Application for the post of

General Instructions for Completing the Application:

- Please use clear and legible handwriting and write in **blue ink**.
- The application must be completed in the **English language**.
- Use **only the prescribed application format** provided.
- Applications submitted in **any other format**, including CVs, or those that are **unclear or incomplete, will be rejected**.

01. PERSONAL INFORMATION

This section is for office use only.

Status: Mr. / Mrs. / Miss (Underline the correct status)

Name in Full:

Name with initials:

Date of birth: / /
(DD/ MM/ YYYY)

Age as at the closing date of the application: Yrs M D

Nationality:

Gender:

National Identity Card Number (NIC):

02. CONTACT INFORMATION

Permanent address:

Temporary address (*If different from permanent address*):

Contact details:

E-mail address:..... (*Use correct spelling and email format*)

Two contact numbers: (*Provide two active contact numbers*)

(1)										
(2)										

03. ACADEMIC QUALIFICATIONS AND OTHER QUALIFICATIONS:

G.C.E. (Ordinary Level) Examination

Index No:.....

	Subject	Grade	Year of obtaining the grade		Subject	Grade	Year of obtaining the grade
1)				6)			
2)				7)			
3)				8)			
4)				9)			
5)				10)			

G.C.E. (Advanced Level) Examination

Stream:.....

Index No:.....

	Subject	Grade	Year of obtaining the grade		Subject	Grade	Year of obtaining the grade
1)				3)			
2)				4)			

Degree Qualifications

Degree	Major Field	University	Class	Effective date

Postgraduate Qualifications

Qualification	Major Field	Institute	Result	Effective date

Professional Qualifications

This section is for office use only.

Qualification	Time Period	Institute	Result	Effective date

Membership of Professional Bodies (If any)

Institution	Name of the Membership	Effective date

Work Experience

Designation	Organization	Period	Start date	End date

Skills and Competencies (Please tick the relevant box)

	High	Moderate	Low
Language proficiency:			
Sinhala			
English			
Tamil			
Computer literacy			

ANY OTHER QUALIFICATIONS (If any)

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EXTRA-CURRICULAR ACTIVITIES *(If any)*

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This section
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use only.

TWO NON-RELATED REFEREES

Name	Designation and Organization	Contact Numbers	Email
(1)			
(2)			

DECLARATION OF THE APPLICANT

I hereby declare and certify that the information provided in this application is true and accurate to the best of my knowledge. I accept responsibility for any incomplete or incorrect details and understand that any false or misleading information may result in disqualification.

I shall not alter the information in the future.

Date:..... Signature of Applicant :.....