

6. (a). **Date of Birth** :

Date	Month	Year

(Please attach a copy of the birth certificate):

(b). **Citizenship of Sri Lanka** :
 (by registration or by descent)

7. **Have you ever been convicted for a civil or criminal case previously** :

If 'Yes 'state further information :

8. **Academic Qualification:**
 (Attach copies of certificates with academic transcripts)

Degree	Class	GPA	University	Effective Date			SLQF Level
				Date	Month	Year	
1.							
2.							
3.							
4.							

9. **Postgraduate Qualifications:**
 (Attach copies of certificates with academic transcripts)

Postgraduate Degree/ Diploma	University	Effective Date			SLQF Level	Duration
		Date	Month	Year		
1.						
2.						
3.						
4.						
5.						

10. Professional Qualifications, Memberships & Fellowships, etc.
(Attach a copy of certificates)

Institution	Qualification Obtained	Effective Date			Duration
		Date	Month	Year	
1.					
2.					
3.					
4.					
5.					

11. Training in the field of Management & Administration/ Financial and IT Qualifications
(Attach a copy of certificates)

Field	Institution	Name of the Training Programme/ Workshop	Date of Commencement			Duration		
			Date	Month	Year	Days	Weeks	Months
Management & Administration								
IT Qualifications								
Financial Qualifications								

12. Any other Academic Distinction, Scholarships, Medals, Prizes, etc, (Indicate the Institution from which such awards have been obtained) (Attach a copy of certificates)

Academic Distinction, Scholarships, Medals, Prizes	Institution	Year
1.		
2.		
3.		

13. **Research & Publications and other creative works, if any: (If space is insufficient, please use a separate sheet)**

--

14. **Highest Examination passed in:**

1. Sinhala -
 2. Tamil -
 3. English -

15. (a). **Present Employment:**

i.	Designation:			
ii.	Date of appointment:			
iii.	Whether confirmed or not:			
iv.	Place of work (address):			
v.	Salary Scale of the post:			
vi.	Present Salary:	Basic Salary:		
		Allowances:		

- (b). **Previous Employment Records:**

(Attach copies of service certificates)

(The appointment letters will not be considered for service experiences)

- (i). **If university service:**

Post	Place of Work (Department)	Period of Service						Duration
		From			To			
		Date	Mont h	Year	Date	Mont h	Year	
1.								
2.								
3.								
4.								
5.								

(ii). **Other than university service:**

Post	Place of Work (Department)	Period of Service						Duration
		From			To			
		Date	Mont h	Year	Date	Mont h	Year	
1.								
2.								
3.								
4.								
5.								

(c). **Total experience gained as at the closing date of the application relevant to the post applied:**

Years	Months	Days

16. (a). **If you have obtained no-pay leave during service, state reasons and the period of such leave:**

Reason/s	From	To
1.		
2.		

(b). **Particulars of Bond Obligation to Government and Higher Educational Institutions/Institutes if any:**

Name of the Institution	Obligatory Period	Amount due in Rupees

(c). **Commendations/ Punishments, during your career in any other organization that you serve previously:**

Commendations	Punishments

(d). **Have you ever been served with a Vacation of Post (VoP) notice by any other organization? If so, please provide details.**

.....

.....

.....

.....

17. Extra-curricular Activities

	Event	Achievement	Level
	Sports		
	Subject	Level	
	Certificates other than Educational & Professional		

Societies/ Other Significant Positions held in organization in addition to what is mentioned previously	Position	Society
Other Achievements (Nationally & Internationall y)		

18. Names of two non-related referees.

Name	Designation	Address	Contact No. & e-mail address
1.			
2.			

19. I hereby certify that the particulars submitted by me in this application are true and accurate. I am aware that if any of these particulars are found to be false or inaccurate, I am liable to be disqualified before selection and to be dismissed without any compensation, if the inaccuracy is detected after the appointment.

Date:

.....
Signature of the Applicant

Recommendation of the Head of the Department/ Division

Forwarded. He/ She could be released/ could not be released from the service of this Department/ Branch/ Unit if selected for an appointment.

Date:

.....
Signature of the Head of the Department/ Division

In the case of university service.

I certify that the particulars given in columns 01 to 16 of this application are correct according to the applicant's personal file maintain by the Establishments Division.

Subject Clerk:

Date:

.....
Signature of the Deputy/ Senior/ Assistant Registrar (Establishment Division)

Recommendation of the Registrar/ Bursar:

Recommended/ Not-Recommended

Date:

.....
**Signature of the Registrar/
Bursar**

For other Services

I certify that the particulars given in columns 01 to 16 of this application are correct according to the applicant's personal file maintain by the Establishments Division.

Date:

.....
**Head of Department of
Establishment Division**

Recommendation of the Head of the Institutions.

Recommended / Not-Recommended. He/ She could be released/ could not be released from the UGC/ University/ Institute if selected for the appointment.

Date:

.....
**Signature of the Head of the
Institute**