

SPECIMEN APPLICATION FORM

PUBLIC SERVICE COMMISSION

Limited Competitive Examination for Recruitment to the Grade III of the Sri Lanka Agricultural Service – 2024 (2026)

(For office use only)

Post applied (vide. Paragraphs 01 and 05 in the gazette notification))	
Post	code of the post

Medium of the examination (vide .Para.10 in the *Gazette* notification - indicate the relevant No.in the cage)

Sinhala - 2
Tamil - 3
English - 4

If apply for the post of Assistant Director of Agriculture (Agricultural Research), the part of the question paper selected to be answered in accordance with first Appendix: if (A) indicate “1” in the cage and if “B” indicate “2” in the cage. This will not be allowed to change letter. This selection is not allowed to be changed later.

01. (i) Full Name (In English capital letters)-----
Ex: HERATH MUDIYANSELAGE SAMAN KUMARA GUNAWARDENA
- (ii) Name with initials, stating the initials at the end (in English capital letters)

(e.g: GUNAWARDENA, H.M.S.K.)
02. (i) Permanent address : (Admission card will be posted to this address)
- (a) In English capital letters : -----
- (ii) Official Address : (If an officer in the Public Service / Provincial Public Service his /her official address should be stated. Any change in the address should be notified immediately)
- (a) In English capital letters : -----
03. Sex : (indicate the relevant number in the cage)
Male - 0 ☐
Female - 1 ☐
04. National Identity Card No.:
05. Mobile Phone No.:
06. (i) Date of Birth: Year: Month: Date:
- (ii) Age as at the closing date of applications : Years: Months : Days:
07. State whether you are a citizen of Sri Lanka : (indicate the relevant word in the cage)
Yes ☐ No ☐
08. Educational Qualifications :
- 8.1 Degree Qualifications:
- | Degree/Degrees obtained | Whether the degree / degree obtained is a four year degree / degree | Academic year and the valid date of the degree (Indicate clearly) | University / Universities | Subjects | Pass | Medium |
|-------------------------|---|--|---------------------------|----------|------|--------|
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
09. State whether you have sat for the Limited competitive examination for recruitment to the Sri Lanka Agricultural Service before? If so indicate the year/years:-----
10. State the qualifications obtained by applicants who apply for Limited Competitive examination to be eligible to sit for the examination under paragraph 05 of this notification.

Present Post	Post eligible to be recruited under limited recruitment	Date of obtaining eligibility to apply for the post of
1. Research Assistant 2. Soil surveyor 3. Land evolution Officer 4. Agricultural Instructor 5. Economic Assistant 6. Garden Assistant 7. Associate Officers Service Category (State the post)	1. ADA(Agricultural Research) 2. ADA(Agricultural Development) 3. ADA(Agricultural Economics)	ADA(Agricultural Research), ADA (Agricultural Development) or ADA(Agricultural Economics). (Date of completing the qualifications as Para 5.1 of the notification)

11. Provide details if you have obtained local/foreign study leave without pay, have been released for other Government services, or have taken any other local/foreign leave without pay.

12. Have you ever been convicted in a court of law for any offence? Yes/No.

If yes, give details -----

13. Particulars on the Receipt obtained on payment of Examination Fee:

- (i) The post office to which examination fee was paid :-----
(ii) Receipt No.:----- Date -----
(iii) Amount paid :-----

Affix the receipt here from on of its edges so as to be unglued
(it would be an advantage to keep a photocopy of the receipt)

14. Declaration of the applicant:

I do hereby certify that the particulars given by me in this application are true and correct. I am also aware that if any particular contained herein is found to be false or incorrect, I am liable to disqualification if detected before selection and to dismissal with immediate effect, if detected after the selection and, I will be responsible for any lapse caused while preparing the application. Further, I agree to abide by the rules imposed by the Commissioner General of Examinations. I also declare that I have paid the prescribed Examination fee and submitted only one application.

Date:-----

-----,
Signature of Applicant.

15. Certificate of the Head of the Department / Head of the Provincial Department/ Secretary to the Ministry

I hereby certify that Mr./ Mrs./Miss is employed in this Department/ Provincial Council/Ministry as a , his/ her work and conduct are satisfactory, he/ she has/ has not earned all increments during immediately preceding 05 years, he/she has fulfilled the all relevant qualifications to the post as per Para 5.1., he/she is eligible in every respect to apply for this post and that there is/ there is no disciplinary action pending against him/her. If selected, he/she can be/can't be released from his/ her present post. (Write-off the words inapplicable).

_____,
Signature of the Head of the Department /
Head of the Provincial Department/
Secretary to the Ministry.

Name : _____.

Designation : _____.

Address : _____.

Date : _____

(Attest placing the official seal)