

Development Lotteries Board
Human Resource and Administration Division



Application Form for the Posts of Territory Manger, IT Assistant, Sales Promotion
Assistant and Field Promoter

APPLICATION FOR THE POST OF

01. PERSONAL INFORMATION

Status (Dr, Mr, Mrs, Miss)	
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Name in Full (in English block letters)																			

Name with Initials (in English block letters)																			

Permeant Address (in English block letters)																			

NIC			
Date of Birth	Date	Month	Year

Civil Status	
Gender	

Email	
Telephone Number	
WhatsApp Number	

02. EDUCATIONAL QUALIFICATIONS (ATTACH COPIES OF CERTIFICATES)

1. G.C.E. (Ordinary level)		Index Number			
Examination		Year			
#	Subject	Grade	#	Subject	Grade
1	Buddhism		6	History	
2	Sinhala		7		
3	English		8		
4	Mathematics		9		
5	Science		10		

2. G.C.E. (Advance level) Examination		Index Number			
		Year			
#	Subject	Grade			
1					
2					
3					
4					

03. ACADEMIC QUALIFICATIONS (ATTACH COPIES OF CERTIFICATES)

#	Institution	Qualification	Date of Effective	Duration	
				From Date	To Date
1					
2					
3					
4					
5					
6					

04. PROFFESIONAL QUALIFICATIO (ATTACH COPIES OF CERTIFICATES)

#	Institution	Qualification	Date of Effective	Duration	
				From Date	To Date
1					
2					
3					
4					
5					
6					

05. WORK EXPERIENCES (ATTACH COPIES OF CERTIFICATES)

#	Organization	Post	Duration	
			From Date	To Date
1				
2				
3				
4				
5				
6				

06. ANY OTHER QUALIFICATION (IF ANY)

07. TWO NON- RELATED REFERENCES

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08. Have you been convicted of a criminal offence in a Court of Law? If so, give the details:

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09. Copies of the following certificates (not originals) should be attached:

- Birth Certificate
- Certificates of Educational Qualifications
- Academic Transcript of Degree
- Certificates of Professional Qualifications
- Letters of Experience
- Copies of other achievement certificates

10. I do hereby certify that the particulars furnished by me in this application are true and accurate. I am also aware that, any particulars contained herein are found to be false or incorrect, I am liable to be disqualified before selection or to be dismissed without any compensation if such detection is made after appointment.

Date :

.....

Signature of Applicant

Certificate of Head of Department / Institution

(Only for the applicants serving in the public service / Government Corporations/ Statutory Boards)

Chairman/CEO,

I recommended and forward the application of Mr/Mrs/Miss

..... Holding the post of in this institution. I certify that his / her work and conduct are satisfactory and that he/she not been subject to any disciplinary action. He /She can be released / cannot be released from service if selected this post.

.....

Date

.....

Signature if Head of Department / Institution

(Official stamp)