Specimen Form of Application

Open Competitive Examination for Recruitment to the Post of Electrician in the Primary Level Skilled Service Category (PL 03-2006-A) of the Ministry of Health and Mass Media-2026

Language medium appearing for the examination: ☐
(Sinhala – S, Tamil-T, English-E)
(indicate the relevant English letter in the cage)

District of residence: ☐

1. (i) Name with initials: -.....
(In Sinhala/Tamil)
(ii) Name in full:-……
(In Sinhala/Tamil)
(iii) Name with initials: -. Mr./Mrs./Miss.....
(In English block letters):Eg: - Mr./ ~~Mrs./Miss~~. SILVA A.B.
(iv) Name in full: -…….
(In English block letters)

2. Address of residence
(i) Permanent Address of residence: -.....
(In English block letters)
(ii) Permanent Address of residence: -.....
(In Sinhala/Tamil)

3. Date of birth :-

Year					Month			Date		

3.1 Age as at the closing date of applications :-

Years			Months			Days		

4. National Identity card No. :-.....

5. Telephone No. :- Personal (Mobile) ..... Landline :-.....

6. Email Address :-.....

7. Gender :- Female ☐ Male ☐

8. Whether a Sri Lankan citizen :- Yes ☐ No ☐

09. Marital status: -.....

10. Educational Qualifications: -

(a) General Certificate of Education (Ordinary Level) Examination:
Year: -……/ ……. Index Number: -……/ ….…….

Serial No.	*Subject*	*Pass*	
		First Attempt	*Second Attempt*
01			
02			
03			
04			
05			
06			
07			
08			
09			
10			

(b) General Certificate of Education (Advanced Level) Examination:
Year: -……/ ……. Index Number: -……/…….…….

Serial No.	*Subject*	*Pass*	
		First Attempt	*Second Attempt*
01			
02			
03			
04			

(c) Information of vocational and technical qualifications

Certificate	*Issuing Institution*	*Year*	*Subjects*

(Attach certified copies of the certificates related to the vocational and technical qualifications)

(d) Other special qualifications and experience ……..……..……..
……..……..……..……..…….

11. Have you ever been convicted before a Court of Law?……..……
(Provide particulars, if yes) :-……

12 Details of the receipt relevant to payment of the examination fees: -

I. Office where examination fee waspaid: - ……
II. Amountpaid: - ……...

Affix here the receipt obtained for the payment of Rs.1000 to any branch of the Bank of Ceylon, so as not to be detached. (it is advisable to keep a copy of the application form and the receipt)

13. Certification of the Applicant:
I do solemnly declare that the particulars furnished by me are true and correct. And, Iacknowledge that if any of the particulars contained herein are found to be false or inaccurate, before selection, the application will be cancelled, and if discovered so after selection, I am liable to be dismissed from service without any compensation and subject to the relevant legal action.

Date: -……. ……..,
Signature of the Applicant

14. Attesting Signature of the Applicant:

I do certify that Mr./Mrs./Miss. ……. who submits this application is personally known to me and that he/she placed his/her signature in the presence of me on……...

……,
Signature of the Attestor.

Attesting Officer's
Full Name: - …….
Designation: - ……..
Address: - ……
(verify by placing the official stamp)

15. Following are applicable only to the officers who are alreadyin the Public Service/Provincial Public Service, and have fulfilled the basic qualifications referred to in the *Gazette* notification.

15.1 Information to be completed by the Head of the Department/Institution

i. Name of the officer: - …….
ii. Permanent Service Station and its Address: - ……
iii. Telephone Number of the Permanent Service Station: - ……
iv. National Identity Card Number of the officer: - …….
v. Post held, when applying for the examination: - ……..
vi. Date of appointment to that post: - ……..
vii. Has the officer been confirmed in that post? (If "yes", mention the date of confirmation) : - ……
viii. Has the officer been subject to disciplinary punishments during the service period? (If "yes",provide information thereof) ……
ix. Has the officer been subject to disciplinary punishment by now? (If "yes", provide information thereof) ……
x. Is any disciplinary inquiry currently in progress? (If "yes", provide information thereof) ……

This applicant Mr./Mrs./Miss. ……is serving in this institution from …… in the post of ……. He/she is holding a permanent and pensionable post. I do hereby certify that all the information furnished under No.15 was checked with the records available at this office and found to be correct and that he/she will be/will not be released from the current post if he /she is selected for this post.

……,
Signature of the Head of the Department/Institution.

Name: - ……..
Designation: -…….
Date:- ……..
Department/Institution:- ……..
(verify by placing the rubber stamp)