



Application for the Post of

| 1. | Name in Full : Mr/Mrs./Miss |
|----|-------------------------------|
| | |
| | Name with Initials: |
| 2. | Postal Address: |
| | Contact No: E-mail Address: |
| 3. | National Identity Card No: |
| 4. | Date of Birth : |
| 5. | Civil Status: |
| 6. | Whether Citizen of Sri Lanka: |

7. Qualifications:

a. <u>Academic Qualifications</u>:

| S. No | Degrees/Diplomas | Class | University | Effective Date | Duration | | | | | | |
|------------------------------------|------------------|-------|------------|-------------------|----------|--|--|--|--|--|--|
| 1. | | | | | | | | | | | |
| 2. | | | | | | | | | | | |
| 3. | | | | | | | | | | | |
| 4. | | | | | | | | | | | |
| 5. | | | | | | | | | | | |
| 6. | | | | | | | | | | | |
| Issue No. 02 Rev. No.01 DOI:2020_0 | | | | | | | | | | | |

b. <u>Professional Qualifications</u>:

| S. No | Institution | Qualifications Obtained | Effective Date | Duration |
|----------|-------------|----------------------------|-------------------|----------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |

8. Schools Attended :

| S. No | Name of School | From | То |
|----------|----------------|------|----|
| 1. | | | |
| 2. | | | |
| 3. | | | |

9. Language Proficiency :

| | | Reading | 5 | | Writing | 5 | Speaking | | | | |
|----------|------|---------|------|------|---------|------|----------|---------|------|--|--|
| Language | Good | Average | Poor | Good | Average | Poor | Good | Average | Poor | | |
| English | | | | | | | | | | | |
| Sinhala | | | | | | | | | | | |
| Tamil | | | | | | | | | | | |

10. Experience :

| | Designation/ Salary Code | Institute and EPF No. | Period (from/to) | Experience (years/months /days) | Total Experience (As at the closing date) |
|--|-----------------------------|--------------------------|---------------------|---------------------------------------|--|
| a) Present Occupation (With Salary) | | | | | |
| | | | | | |
| b) Previous | | | | | |
| appointments if any | | | | | |
| | | | | | |

11. Other Achievements :

| S. | Achievement | Year |
|----|-------------|------|
| No | | |
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |

12. Names of two non-related referees with addresses and Contact Nos.

| <u>Name</u> | Address |
|-------------|---------|
| 1 | |
| | ••••• |
| | ••••• |
| | ••••• |
| | |
| | |
| 2 | •••••• |
| | •••••• |
| | •••••• |
| | •••••• |

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

14. Whether your services have been previously terminated/suspended? If so, give details:

15. Are there any disciplinary orders against you? If so, give details:

Copies of the following certificates (Not originals) should be attached: <u>P.S. Applications not supported by copies of these certificates will be rejected</u>

- a) Birth Certificates
- b) Certificates of Educational Qualifications
- c) Certificates of Professional Qualifications
- d) Letters of Experience
- e) Copies of other achievement certificates

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.

Signature of Applicant

| • | • | • | • | • | • | • | • | • | • | • | • | • | • | • | • | • | • | • | • | • | | | |
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Certificate of Head of Department/ Institution

(Only for the applicants serving in the Public Service/ Government Corporations/ Statutory Boards.)

Chairman / Chief Executive Officer - SLEDB,

> Signature of Head of Department/ Institution (Official Stamp)

Date: