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Application for the Post of

01. Personal Information:

1.1 Name with Initials at the end (In English block capitals) :-

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(Ex : GUNAWARDHANA H.M.S.K)

1.2 Name in full (In English block capitals) :-

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(Ex : HERATH MUDIYANSELAGE SAMAN KUMARA GUNAWARDHANA)

1.3 Name in full (in Sinhala/Tamil) :-

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1.4 Permanent Address (In Sinhala/Tamil) :-

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1.5 Permanent Address (In English block capitals) :-

.....

1.6 Gender:-

1.7 Marital Status:-

1.8 Ethnic Group :-

1.9 National Identity Card No:-

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1.10 Date of Birth: - Date

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Month

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Year

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1.11 Telephone No : (WhatsApp)

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1.12 District:-

1.13 Electorate Division:-

1.14 Grama Niladari Division :-

1.15 Email Address:-

02. Educational Qualifications:-

2.1 G. C. E. (O/L) Examination: Year: - Index No :-

	Subject	Grade		Subject	Grade
1.			6.		
2.			7.		
3.			8.		
4.			9.		
5.			10.		

2.2 G. C. E. (A/L) Examination: Year: - Index No :-

	Subject	Grade		Subject	Grade
1.			3.		
2.			4.		

2.3 (i) Degree:-

(ii) Subjects: -.....

(iii) Year : -

2.4 Post Graduate Diploma

(i) Diploma :-

(ii) Subjects : -.....

(iii) Year : -

2.5 Post Graduate Degree

(i) Degree:-

(ii) Subjects: -.....

(iii) Year : -

2.6 Doctor of Philosophy (PhD)

(i) Degree:-

(ii) Subjects: -.....

(iii) Year : -

2.6. Professional Qualifications : -.....

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03. Professional Experience: -.....

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04. Extracurricular Activities : -

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05.Special Achievements : -.....

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06. Non-Related Referees

Name / Telephone No	Position	Address
1.		
2.		

07. Declaration of the Applicant:

(a) I respectfully declare that the particulars furnished by me in this application are true and correct to the best of my knowledge. I agree to bear the loss which may occur due to incomplete and /or incorrect completion of any part of this application. Further, I state that, all sections of this application completed are true and correct to the best of my knowledge.

(b) I shall not subsequently change any information stated above.

.....
Date

.....
Signature of Applicant

08. This section is applicable only for candidates who engage in government employment this Ministry/Department/Institution

I hereby certify that Mr./Mrs./Miss
..... who is working in this ministry/department/institution, is working in the post of
..... and his/her work and conduct are satisfactory, no disciplinary action is
pending against him/her and no decision has been taken to impose any such in the future. If he/she will
be selected for this post, he/she can/cannot be released from the service.

Date

.....
Signature of the Head of the
Department or Authorized Officer.

Name:

Designation:-

Ministry / Department:-