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# GENERAL SIR JOHN KOTELAWALA DEFENCE UNIVERSITY

## APPLICATION FOR THE POST OF TEMPORARY DEMONSTRATOR

NIC No.

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APPLIED POST : .....

FACULTY : .....

01. Name ( In block letters )

(a) Full name .....

Name with initials: Dr/Mr / Ms.: .....

02. (a) Permanent Address: .....

(b) Tel: Res. No. : ..... Mobile No. : .....

(C) E-Mail: ..... Fax : .....

03. Date of Birth:

Year	Month	Date

04. Age:  
as at closing date

Years	Months	Days

05. Civil Status:

Married	Single

06. Sex:

Male	Female

07. Sri Lankan Citizenship: By Descent  By Registration 

08. Highest Examination passed in the following Languages:

	Sinhala
	Tamil
	English

09. University Education (Basic Degree):

University	Degree & the year	Medium	Special or General Degree	Subjects followed	Class (Pl. indicate clearly)

10. Postgraduate Qualifications:

University/Institution	Degree/Diploma Course (Pl. indicate whether by research or by Examination)	Period		Subjects followed and the effective date	Results
		From	To		

11. Details of Awards/Scholarships etc.

University/ Institution	Scholarships/ Award/ Prices/ Academic Distinctions	Year

12. Research & Publications, if any: (if space is insufficient, please use a separate sheet)

13. (a) Present Occupations: (if space is insufficient, please use a separate sheet)

University/ Institution	Designation & nature of work assigned	Salary drawn per month	Period of stay	
			From	To

(b) Previous Occupations: (if space is insufficient, please use a separate sheet)

University/ Institution	Designation & nature of work assigned	Salary drawn per month	Period of stay		Reason for Leaving
			From	To	

14. Extra Curricular Activities:

15. Any other relevant facts:

17. Names, occupations and addresses of two non related referees:

Name	Address	Occupation	Contact No

18. Certification by Applicant

I hereby certify that the particulars submitted by me in this application form are true and accurate. I am aware that if any of these particulars are found to be false or inaccurate, I am liable to be disqualified before selection and to be dismissed without any compensation, if the inaccuracy is detected after appointment.

Further, I have enclosed copies of following documents. (Please put “√” mark)

A. Primary Educational Qualifications

- 1. Diploma
- 2. Basic Degree Certificate
- 3. Transcript/ Detailed results sheet

B. Postgraduate Qualifications

- 1. Postgraduate Degree certificate
- 2. Transcript/ Detailed results sheet

C. Professional Qualifications

- 1. Certificates/ Letters
- 2. Special Training

D. Service Certificates



Date : .....

.....  
Signature of Applicant

19. To be completed by the present employer (If any)

I certify that the applicant ..... is known to me personally, that he/she is employed in ....., and that he/she can be released from this Department/Board / Corporation if he/she is selected for the above post.

(Delete irrelevant words)

Signature of the certifier : .....

Full name of the certifier : .....

Post : .....

Address : .....

Date: .....

**For Office Use**

Date Received		
Eligibility	Yes	No
If No, Reasons		
Registrar/Senior Assistant Registrar (Establishment)		
Comments of Head/Dean		