

APPLICATION FOR THE POST OF TRANSLATOR (SINHALA / TAMIL)

THIS FORM SHOULD BE FILLED CLEARLY IN ENGLISH (BLOCK CAPITALS)

(Please attach copies of Certificate of Birth, National Identity Card, Certificates of Academic/ Professional Qualifications and Documents to prove your Experience)

1. Last Name with Initials : (Mr/Ms/Mrs).....

Names denoted by initials :

2. Date of Birth :

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D D M M Y Y Y Y

3. Age :

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(as at2019)

D D M M Y Y

4. National Identity Card No. :

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5. Gender : **Male** **Female**
(Enter (✓) relevant cage)

6. Civil Status : **Married** **Single**
(Enter (✓) relevant cage)

7. Permanent Address :

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8. Nearest Police Station :

9. Contact Details : **Mobile No** :

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Residential No :

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E-mail :

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10. Academic Qualifications :
Degree Qualification

Degree	University / Institute	Result	Subject	Effective Date

G.C.E. (Advanced Level)

Index No.:	Year:
Subject	Result
1.	
2.	
3.	

G.C.E. (Ordinary Level)

Index No.:	Year:		
Subject	Result	Subject	Result
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

11. Any Other Academic / Professional Qualifications :

Qualification	Institution	Result	Duration

12. Employment Record**Present Employment :**

Place of Work	Position	From	To	Duration

Previous Employment :

Place of Work	Position	From	To	Duration

13. Computer Literacy :

Course	Institution	Result	Duration

14. Language Proficiency :

Language	Fluent	Very Good	Good	Poor
Sinhala				
English				
Tamil				

15. Non -Related Referees:

	(i)	(ii)
Name		
Position		
Organization		
Address		
Contact No. Office		
Mobile		
E-mail		

I agree to serve any part of the country as required by the bank, in the event if I have been selected for the post.

I certify that the information given in this application is true and correct. I am aware that submission of any incorrect information will disqualify me for the post and if any information found to be incorrect after appointment, the Bank has the right to terminate me from service without prior notice and without any compensation.

Also I am aware that the bank has the right to disqualify me in the event of any form of canvassing.

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Date

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Signature