

28, Lesley Ranagala Mawatha, Colombo 08.

Tel: 2689639 Fax: 2689643 e.mail: admin@pim.sjp.ac.lk Website: www.pim.sjp.ac.lk

APPLICATION FOR POST OF: Area(s) of specialization:						
1. Name in full:						
2. Date of Birth : 3. Nationality:			4. Marital Status: 5. Sex:			
7. Residential Addre	ess:		8. Business Address:			
8. Education: Give de (Give class obtaine	etails of secondal ed at the degree	ry, technical an exam):	d university education etc. in chronological order.			
Institution	Da ⁻ From	te To	Qualification obtained. Give the month and year of award Degree & class			

Institution	Qualif	Duration To From			
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11. Research, Publication, Se	•	T		
	Source of Publication			
12. Teaching Experience:		,		
Institution Subje		5	From	То
13. Consultancy Experience:				
Majo	Clients			

14. Teaching Interests:	
Proposed Area(s) of Training at PIM	Specify Relevant Qualifications Research, work experience etc.
15. Supplementary Information: (any relevant infor	rmation)
Referees:	
1. Name:	2. Name:
Position:	Position:
Address:	Address:
Tel:	Tel:
I certify that the information given above is correct	<u>.</u>
Date:	O'
Date:	Signature:
(Please also attach you	r full CV along with this application)