

Application No.

Call Up No.

**Office Use Only**

Diploma  Institute  Copies

Effective Date  Age

Post Qualifying Experience

Qualified  Not  Reason

**AIRPORT & AVIATION SERVICES (SRI LANKA) LIMITED  
BANDARANAIKE INTERNATIONAL AIRPORT, KATUNAYAKE**

**APPLICATION FOR THE POST OF CREATIVE MULTIMEDIA OFFICER GR.III**

**1** Title : Mr  Mrs  Miss

Last Name:

Initials with Last Name

Full Name as in NIC (In Block Letters) :

Other Names : .....

**2** NIC No:  Date of Issue:      
Date Month Year

Date Of Birth :    Age as at 12/07/2019:    
Date Month Year year Month

Gender: Male  Female  Nationality:

Marital Status : Single  Married  Divorced  Widow

**3 Contact Details**

Permanent Address : .....

City/Town: ..... Postal Code : .....

Telephone Numbers Home: ..... Mobile No: .....

Office : ..... e-Mail: .....

District : ..... Province : .....



**Professional Qualifications (Examination/Memberships of Professional Bodies (Associate/Corporate Membership etc.) (Copies of certificates should be attached)**

8	Institution	Name of the Examination/Membership	Membership Category	Effective Date

**9 Special Achievements**

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**Employment History**

**(a) Present Post:(Copy of Service certificate or Appointment Letter should be attached)**

10	Post	Institution	Period		Describe the work done
			From (dd/mm/yyyy)	To (dd/mm/yyyy)	

**(b) Previous Employment**

**(Copies of Service certificates or Appointment Letters should be attached)**

	Post	Institution	Period		Total Service
			From (dd/mm/yyyy)	To (dd/mm/yyyy)	

**11 Working Experience**

Please explain the key responsibilities handled under each position mentioned above in part (b) in brief

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**Details of two non related referees:**

12	No.	Name & Position	Official Address & Tele. Nos.	Residential Address & Tele. Nos.

I hereby certify that the particulars submitted by me in this application 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.

Signature of the applicant: ..... Date: .....