

## SOUTH EASTERN UNIVERSITY OF SRI LANKA

### FORM OF APPLICATION

<b>A</b> ppli	ication for th	ne Post of	·:		•••••		•••••				•••••	•••••		
Facu	ılty:	•••••	•••••											
Depo	artment:	•••••	•••••	•••••	•••••				•••••		•••••	•••••	•••••	
1.	(If registered within bracked Rev/Prof/Dr	Name in Full: (underline Surname) (If registered as a student in a University under any other name, please indicate such name(s) within brackets supported by an affidavit) Rev/Prof/Dr./Mr./Mrs./Ms./Miss												
	Name with	initials :												•••••
2. i.	Sex:	Male _			F	Femal	e							
ii.	Civil Status:	Single			1	Marri	ed							
a) Postal Address (Any change should be communicated immediately)														
		••••••		•••••	•••••	•••••				•••••		•••••		
				•••••	•••••	•••••	•••••	•••••	•••••	•••••	••••••	•••••		••••
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	b) Contact Pl	hone Numb	er											
	Mobile:		R	eside	ence:				(	Offic	e:			
	C) E-mail Ad	dress :		•••••										
4.	Date of Birt	h (Please atto	ach copy of	Birth	Certif	icate)		Age o	at Clo	sing	Date			
	Year	Month	Date					Years	S	Mont	hs	D	ays	
5.	Citizenship: (If by registrat	By Desce tion indicate F		_	, -	gistra s of Du		izensh	ip)	Dual	Citi	zensh	ip _	
6.	National Ide	entity Card	No:											

7. School	Education:	

Name of School(s) Attended	From	То

8. University Education: First Degree (Duration and effective date should be given. <u>Please</u> <u>attach copies of all relevant certificates with transcripts</u>).

	Dur	ation	Course followed with	Results
Name of the University	From	То	Subjects (Special/ General/mode of study*)	(give class or grade with GPA & effective date)

<sup>\*</sup>i.e: Full Time, Part Time, Distance Mode, Online Mode, Top up etc.

9. Postgraduate Qualifications: (State whether by course work or research, duration and effective date. <u>Please attach copies of all relevant certificates with transcripts</u>).

Institute & Mode of Study*	From	То	Year

 $<sup>\</sup>star i.e:$  Full Time, Part Time, Distance Mode, Online Mode, Top up etc.

10. Other Diploma, Membership, Fellowships etc. (attach copy of certificate)

Institute	Diploma etc.	Durations and Credits	Year

11. Professional Qualifications: (attach copy of certificate)

Institute	From	То	Examination passed or Degree obtained etc.
			_

12. Language Proficiency (Please T	12.	Language Proficiency	(Please	tic	$\checkmark)$
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Language	Ability of General Communication			Ability to Teach / Work			/ork	
Language	Very good	Good	Fair	No Knowledge	Very good	Good	Fair	No Knowledge
Sinhala								
Tamil								
English								
Other								

# 13. Research Publications, if any. (if space is insufficient, please use a separate sheet) (I) Books

No.	Name of the Book / Chapter of Book	Date of Publication & Name of Publisher	Author(s)	ISBN No:
i ii iii				

#### (II) Abstracts

No.	Title of Article	Author(s)	Source and date of the publication
i ii iii			

#### (III) Conference Papers (full Papers)

No.	Title of Article	Author(s)	Source and date of the publication
i			
ii			
iii			

#### (IV) Journal Papers

No.	Title of Articles	Author(s)	Source and year of publication	Nature of Journal (Peer Review & Indexing)
i iii				

	Institute	Period of Service		Last Monthly	Reason for
Post held		From	То	Salary received	Cessation of Employment
(c) Commendations	/Punishments, if any	, during yo	ur career ii	n the University	/ Educational
Institution/ Instit	ution.				

(d) Have you ever been served with a Vacation of Post notice by any other University/

Any further relevant particulars: (not included above)

a. Basic Salary:

b. Allowances :

14. (a)

15.

Present Occupation:

ii. Date of appointment to such post :

iv. Place of work with the Address:

v. Salary Scale of the post:

Government Institution? If so please provide details.

vi. Present Salary

iii. Whether confirmed in the present post:

(Please attach a evidence from the employer)

i. Post:

	Name	Designation	Address & Contact details		
		<del></del>	with email Address		
(i)					
ii)					
te	:-				
	One of the refere candidate works.	ees should be the Head of the	Institution in which the		
	Paste the cash receipt properly here				
	(It would be ac	Paste the receipt here secu dvisable to keep a photocopy of the	• •		
18.	and accurate. I am	aware that if any of the part	y me in this application are true iculars are found to be false or and /or to be dismissed without		
		f the inaccuracy is detected afte			
	Date:				
			Signature of the Applicant (Should be inked)		

#### Note: -

- i. Submit your application according to the requirements and guidelines indicated in the Website <a href="https://www.seu.ac.lk">www.seu.ac.lk</a> relevant to the advertised post.
- All applicants should possess the required qualifications & experience by the closing date of the application. No qualification fulfilled after the closing date will be considered.
- iii. Applications not submitted according to this format and submitted without copies of required supportive documents will be rejected.
- iv. Incomplete application will be rejected

The Vice Chancellor

For Public Service/ Corporation/ Statutory Board Candidates Only (Based on UGC Establishment Code Section 13.4 of Chapter I)

\* Any application which is not submitted thorough the proper channel will be rejected.

South Eastern University of Sri Lanka						
Application for the post of						
Submitted by						
Is forwarded hereby. If he/she is s released.	selected for the said post he/ she can be / cannot be					
Date:	Signature of the Head of the Department (Official Seal)					
Date :	Signature of the Head of the Institution' (Official Seal)					

\* As defined by the chapter I of Volume I of the Establishment Code of the Democratic Socialist Republic of Sri Lanka

(N.B.: when applying for several posts, each post should be applied for separately)