PARLIAMENT OF SRI LANKA

Post of Driver

01.	(a)	Name with initials (in Sinhala/Tamil):													
	(b)	Names denoted by initials (in Sinhala/Tamil):-													
	(C)	`	Full Name (in block capitals) :- (Mr/Mrs/Miss)												
02.		N. I. C:-		T	·····	······								•••••	•••••
03.	(a)	Private Address :-													
		Telephone N	umber:-		·····		••••	 	<u>.</u>	····	<u>.</u>]		•••••
	<i>(b)</i>	Official Addi													
		Telephone N			• • • • •			····	·····]		
	(c)	Please indica Private	te the addi	ress the a	dmi	ssion		,	oste icial						
04.	(a)	Date of Birth:(A copy of the birth certificate should be attached)													
	(b)	Age as at the closing date of applications:- Year: Month: Date:													
05. 06.		Status :- (Ma er :- (Male/Fo		married,)										
07. 08.	State	whether a citiz ation Qualifica	en of Sri L		`			s sh	oula	d be	atta	iche	d)		
	Examination G.C.E O/L		Subject			Pass Obtained		d			Year				
			Sinhala/Tamil												-
]

9.	Professional Qualifications :- (Copies of the certificates should be attached)										
10.	Experience :- (Copies of the certificates should be attached)										
11.	Details of the Present Employment										
	(a) (b)	Name and Address of the Institution: Date of first Appointment:									
	(c) (d)	Present Post:									
	(e)	Allowances:									
	<i>(f)</i>	Gross Salary:									
12.		Have you been convicted for a criminal offence by a Court of Law? (Yes/No) If yes, give details:									
13.	3. Have you served under the Government before? (Yes/No) If yes, give details:										
correc conta	ct. I ar ined h	certify that the particulars furnished by me in this application are true and m also aware that, I am liable to be disqualified for this post if any particulars erein are found to be false or incorrect before selection, or to be dismissed without esation if such detection is made after appointment.									
Date:		Signature of the Applicant									
	0.1.	Certification of Head of Department/Institution									
		for applicants serving in the Public Service/Provincial Public Service)									
Secre	tary G	eneral of Parliament,									
post o	of	d and forward the application of Mr / Mrs /Miss holding the holding the in this Institution. I certify that He/she has been									
subjec	ct to ar	n the post, his/her work and conduct are satisfactory and he/she has not been my disciplinary action and there is no intention to make such inquiry. He/she can cannot be released from the service if selected for this post.									
		Signature of Head of Department/Institution (Official Stamp)									
Date:											