	Office Use Only				Call Up No.									
	Age :		GCE(O/L	.)		English	ı		Ма	thema	tics			
	GCE(A/L)		Height	:	L	anguage								
	Qualified		Not		Reason									
•			AIRPORT :											
	AF	PPLICAT	TION FO	OR TE	RAINEE	AIRPO	RT S	SERVI	CES	ASSIS	TANT	<u>-</u>		
1	Title :	Mr	Mrs		Miss		(Other [
	Last Name	:												
	Initials with Last Name	:												
	Full Name as in NIC	:												
	Other Names	:												
2	NIC No:					D	ate o	f Issue	: Da	ite f	Month		Year	
	Date Of Birth :	(Copy Date	of the Bir Month	rth ce	rtificate Year			t ached) at 26/0		9:	nr	Mo	onth	
	Gender:	Male	Fem	ale		National	ity:]		
	Marital Status	: 5	Single		Marrie	d	Divo	rced _	v	Vidow [
	Height:	Inches												
3	Contact Details	s												
	Permanent Addre	ess:												
	City/Town:					Posta	al Cod	de :						
	Telephone No:					Mob	ile No	o:						
	e-Mail:					Prov	ince	: _						
	District :					Polli	na D	ivision	•					

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4	Highest Education Qualification	on	:				
	Academic Qualification G C E (O/L) (Copies of ce	<u>S</u> ertifi	cates sho	uld be	attached)		
5	Subject		Grade		Index No		Year
	G C E (A/L) (Copies of ce	ertifi	cates show	uld be	attached)		
6	Index No :				Year	: Г	
0	Subject		Grade		Subject	<u> </u>	Grade
	Professional Qualificati	ione	(Coning o	facut	ificatos shouls	l bo atta	ahad)
	Professional Qualificati	OHS	(Copies o	or certi	Ticales snouic	1	
7	Institute		Name of Cou	rse	Level of Qualifications	Duration, Clo	Commencing & sing Date

Language Proficiency

8	Language	Reading			Speaking			Writing					
		1	2	3	4	1	2	3	4	1	2	3	4
	English												
	Sinhala												
	Tamil												

Please initiate "√" as appropriate.

1 - Excellent 2 - Good 3 - Average 4 - Poor

Working Experience

9	Designation	Institute & Address	From /To

Details of two non related referees:

10	No.	Name & Position	Official Address And Telephone Nos.	Residential Address & Tel. Nos.

I do hereby certify that the above particulars given by me are true and correct to the best of my knowledge.

Signature of the applicant:	 Date:	
J 11		