## **Application Form**

## GENERAL CERTIFICATE OF EDUCATION (ORDINARY LEVEL) EXAMINATION DECEMBER 2017

The District, Town and Town Number	l r selected :	
District: Town:	Town Numb	
Private Candidates should select the	town closest to their permanent residence	from the list of towns giv
Full name: (Write your full name in Evill not be done. <b>Don't write the nar</b> I. In English (in Block Letter		rtificate. Later , the name
II. In Sinhala/Tamil:		
Address: (In Block Letters)		
Sex: Male 0	Female 1	
Date of Birth: Year	Month I	Date
National Identity Card No.:		
Telephone No:		
Medium of Language: Sinhala 2	Tamil 3 English 4	Bilingual 5
Examination Fee paid: in Figures Rs.	in words Rs.	
(I) Receipt No (III) Post Office/Sub Post-Office	e to which the fee was paid:	
Total number of subjects applied:		
Subjects and Subject Numbers:  Only the candidates those who applin the relevant cage.  Subjects Applied Medium	oear in two mediums state the medium in Subject No.	n which they appear for ea  Medium Subject N
01	SUBJECT IN CAT	EGORY I
02.	07	
03	SUBJECT IN CAT	EGORY II
04	08	
05.	SUBJECT IN CATE	EGORY III
06	09	

Signature of Candidate

Date:....

13.	Paste in this box,	the c	original	receipt	received	for	payment	of 1	the	examination	fee.	Keep	a	photocopy	of
	the receipt with you	. The	applicat	ions in w	vhich <b>ori</b>	gina	l receipt l	has i	not	been pasted	are	rejecte	d.		

No of Subjects	1	2	3	4	5	6 to 9
Fee	Rs. 100/-	Rs. 150/-	Rs. 200/-	Rs.250/-	Rs. 300/-	Rs. 350/-

Receipt obtained from the P.O./ Sub P.O. for the payment of Examination Fee should be pasted here firmly. Candidates are advised to keep a photocopy of the receipt or note down the receipt number, date and the name of the post office.

14.	Attestation of signature:
	Candidate should place his/her signature in the presence of the attester. The attester should personally enter the
	Identity Card number and the Date of Birth as it appears in the Birth Certificate of the candidate in the application.

	(a)	The applicant
	(b)	Signature of the Applicant
	(c)	Address of the Applicant:
	(d)	I certify that his/her date of birth is, according to his / her Birth Certificate and the number of the Birth Certificate is
Signatuı	re of the a	attesting Grama Niladhari:
Name o	f the attes	sting Grama Niladhari:
Grama 1	Niladhari	Division and No.: (Official Rubber Seal)
Address	s:	
D-4		



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