

BUDDHIST & PALI UNIVERSITY OF SRI LANKA

FORM OF APPLICATION

For Office Use

I.D.No:

POST OF VENARABLE VICE-CHANCELLOR

| 1 | Name in Full | | | | | | | | |
|---|---------------------|---|--|--|--|--|--|--|--|
| | (in block letters) | | | | | | | | |
| 2 | Postal Address | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 3 | Contact Telephone N | 0 | | | | | | | |
| | | | | | | | | | |
| | Fax No | | | | | | | | |
| | | | | | | | | | |
| | E-Mail | | | | | | | | |

4 Date of Birth

| Year | | | Mo | onth | Date | | |
|------|--|--|----|------|------|--|--|
| | | | | | | | |

5 Age as at closing date of application

| Year | | | Month | | Date | | |
|------|--|--|-------|--|------|--|--|
| | | | | | | | |

6 Sri Lankan Citizenship

| By Descent | |
|-----------------|--|
| By Registration | |

7 Higher Examination Passed in following Language

Name of the Examination

| Sinhala |
|---------|
| Tamil |
| English |

8 University Education (Basic Degree)

| University | degree & the Year | Medium | Special or General Degree | Subjects Followed | Class (Pl. indicate cleary) |
|------------|----------------------|--------|---------------------------------|----------------------|--------------------------------|
| | | | | | |
| | | | | | |
| | | | | | |

9 Postgraduate Qualifications :

| University / | degree / Diploma Course (Pl. indicate | Per | iod | Subjects Followed & the | Results |
|--------------|--|--------------|-----|----------------------------|---------|
| Institution | whether by research for by examination) | E T . | | Effective date | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

10 Professional Qualifications (If Space is insufficients, Please use a separate sheet of same size)

| University / Institution | Qualifications Obtained | Date of commencement | Effective date | Duration |
|-----------------------------|----------------------------|----------------------|----------------|----------|
| | | | | |
| | | | | |
| | | | | |

11 Research & Publications, if any

(If Space is insufficients, Please use a separate sheet of same size)

12 (a) Present Occupation:

| Employer | Designation & nature of work | Salary drawn per | Period | | |
|----------|------------------------------|------------------|--------|----|--|
| Employer | assigned | month | From | То | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

(b) Previous Occupation:

| Employer | Designation & nature of work | Salary drawn per | Period | | |
|----------|------------------------------|------------------|--------|----|--|
| Employer | assigned | month | From | То | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

13 Extra Curricular Activities (If Space is insufficients, Please use a separate sheet of same size)

14 Specific details of administrative experience (For Administrative Category) (If Space is insufficients, Please use a separate sheet of same size)

15 Any Other relevant facts

16 Names, Occupations and Addresses of two non related referees

| Name | Address | Occupation |
|------|---------|------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

17 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 of the inaccuracy is detected after appointment.

Date :

Signature

.....

(To be Completed by the Head of Departments where applicable)

Application forwarded. Please note that if selected action will be taken to release him from service

Date :

Signature of Head of Department



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