POST APPLIED FOR:						
l o	ame in full [Underline Surna [If registered as a student in other name. please indica brackets]	- II	r./Ms			
2. Po	ostal Address					
[Any change should be communicated immediately]						
3. Co	ontact Details:					
	i. Telephone (residen	ce)				
	ii. Mobile					
	iii. E-mail					
4. Date of Birth and Age [Please attach copy of Birth Certificate]						
5. Ci	vil Status					
6. Wł	nether a Citizen of Sri Lanka [State whether by				
de	escent or by registration: if by	registration, give				
re	eference number and date of α	certificate of				
ci	tizenship]					
7. Ec	ducational Qualifications		<u> </u>			
7.1	School Education					
7.1	School/s Attended				From	То
<i>,</i>						
i.						
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i.						
i. ii.						
i. ii. iii.						
i. ii. iii. iv.						
i. ii. iii. iv.	University Education –Unde	, <u> </u>	r –			
i. ii. iii. iv. v.	University Education –Under Name of the University	ergraduate and post Degree/Diploma	Course	Result	From	То
i. ii. iv. v. 7.2	•	, <u> </u>	r –	Result Class	From	То
i. ii. iv. v. 7.2	•	, <u> </u>	Course		From	То
i. ii. iv. v. 7.2	•	, <u> </u>	Course		From	То
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i. ii. iv. 7.2 i. ii. iv. v. vi. 8. Pr	Name of the University	, <u> </u>	Course		From	То
i. ii. iv. v. 7.2 i. ii. iv. v. v. v. sii. iv. v. vi. 8. Pr	Name of the University	, <u> </u>	Course		From	То

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copies of all relevant certificates]			
Institution			
e been obtained -			
Highest Examination passed			
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Salary drawn			
for leaving			
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f any:			
mount due			

15. Commendations/Punishments during your career yes No
If yes, please provide details
16. Extra-Curricular Activities
17. Any other relevant particulars (Not included above)
18. Have you ever been convicted by a court of law? yes No
If yes please provide details

19. Names of two Referees [With address]

	Name	Address					
1.							
2.							
20. I hereby certify that the particulars submitted by me in this application are true and accurate. I am aware that 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 if the inaccuracy is detected after appointment.							
Date		Signature of Applicant					
[TO BE COMPLETED BY THE HEAD OF THE INSTITUTE WHERE APPLICABLE]							
Director, University College Anuradhapura. Application forwarded. Please note that if selected, action will be taken to release him/ her from service.							
Date		ure of Head of Institution					