

## Ocean University Sri Lanka FORM OF APPLICATION

POST: DEPARTMENT / DISCIPLINE				
1. Name in Full:				
2. Whether Rev./Prof./Dr./Mr	· /Mrs /Miss		1	
	/10115./101155			
3. (a) Postal Address:  (Any changes should be communicated immediately)				
(b) Contact No:	,			
Telephone:				
Fax:				
e-mail address :				
4. (i) Date of Birth & Age:				
(ii) Identity Card No:				
<ul><li>5. Civil Status :</li><li>6. State whether citizen of Sri</li></ul>	i Lanka by Dagaant o	r		
Registration If by registrati				
7. Education				
attached		01		
1.				
2.				
3.				
8. University Education	Duration of the	*		Results
(Degree, Diploma etc. and	Degree with dates	Subje		(Give
the Name of the University		offer	rea	class/grade/GPA and effective date)
and Registration No)				effective date)
	1			

<sup>\*</sup> If the degree is a special degree, please indicate only the subject in which specialized.

9. Postgraduate Education	
a) Name of the Degree / Diploma with	
Registration No:	
b) Name of the University:	
c) Whether Full time or Part time:	
d) Whether by course work / Course with Research component / By Research :	
e) Duration of study and the Title of Research:	
f) Field of study and the Title of Research:	
g) Effective date of Degree / Diploma :	
h) Class / Grade /GPA:	
ii) Class / Glade / Gl A .	
10. Special Qualifications : (Professional etc.)	
11. Any other Academic Distinctions, Scholarships, Medals, Prizes etc. (Indicate the Institution from which such awards have been obtained)	
12. Research & Publications, if any:  (If space is insufficient, please use separate sheet of same size) The name of the Journal in which the Publications has been made and the date of the Journal should be mentioned.	

13. a) Present Occupation						
i Designation:						
ii Date of Appointment:						
iii Dept. / Institution and its ac	ddress:					
iv. Nature of Appointment: Permanent / Contract / Temporary / Casual /						
······································						
v. Salary scale:						
a. Basic Salary:						
b. Allowance:						
b) Previous appointments, if an	ny with dates					
Department / Institution	Post	Salary scale	Date			
			From	То		
c) If you are retired from Gove	ernment					
c) If you are retired from Government Service, give date Of retirement, the						
last salary drawn and the pension.						
<ul> <li>d) If your service in a Gover Department or a Corporatio</li> </ul>						
terminated, give reasons.						
	<u> </u>					
14 Feeting Committee Languagianisis						
14. Extra Curricular activities						

15. Any further relevant particulars.
(Not included above)
16. Name of Two persons (with address to whom reference can be made)
<u>Name</u>
1
Address
2
Address
I hereby certify that the particulars submitted by me in this application are true and accurate. I
am aware if any of the 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.
Signature of applicant Date:

17. If the applicant is an employee in a Government / Corporation or Statuary Board this section should be filled by such Head of the Department / Institution.				
The applicant will / will not be released, if selected for appointment.				
	TT 1 CT			
	Head of Institution			
Name :				
Designation:				
Date :				