

## Srilankan HUMAN RESOURCES APPLICATION FORM FOR JUNIOR FIRST OFFICER

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Α	PERSONAL DETAILS
$\boldsymbol{\Lambda}$	FERSUNAL DETAILS

1. NAME (as per passport):	
2. DATE OF BIRTH:	
3. ADDRESS:	
4. TELEPHONE/MOBILE	
NO:	
5. EMAIL ADDRESS:	
6. CITIZENSHIP:	
7. NATIONAL I.D. NO:	
B EDUCATIONAL QUALIFICATIONS	
G.C.E. O/L EXAMINATI	ON
	ON YEAR
G.C.E. O/L EXAMINATI SUBJECT GRADE  1.	
G.C.E. O/L EXAMINATI SUBJECT GRADE	
G.C.E. O/L EXAMINATI  SUBJECT GRADE  1. 2. 3.	
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G.C.E. O/L EXAMINATI SUBJECT GRADE  1. 2. 3. 4. 5. 6. 7. 8.	YEAR
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G.C.E. A/L EXAMINATION												
S	SUBJECT	G	RADE		YEAR							
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2.												
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Signatur	r <u>e</u>			Date								
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	DEGREE		INST	ITUTION	J	YEAR						
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LICENCE	INTERVIEW	LICENCE PAR	ASSES  RTICULAI	RS DATE O	INTE	DATE OF						

D	LIMITATIONS OR ENDORSEMENTS ON LICENCE				

E	INSTRUMENT RATING					
				DATE-A/C TYPE OF LAST I/R CHECK		

F FLYING EXPERIENCE						
TYPE OF AIRCRAFT	ALL UP WEIGHT	COMMANDER		CO-PILOT		
	(kg)	P1 HRS	DATE OF LAST FLIGHT	P1 (U/S) HOURS	P2 HOURS	DATE OF LAST FLIGHT

G AVIATION BACK GROUND						
AIRLINE	ORGANISATION	PERIOD OF EMPLOYMENT	AIRCRAFT TYPE			
HAVE YOU BEEN I	NVOLVED IN ANY A	CCIDENT OR INCID	ENT?			
HAVE YOU BEEN I	NVOLVED IN ANY I	NQUIRY OR INVES	TIGATION?			
DO YOU HAVE A W	/AIVER ON YOUR PI	LOT MEDICAL CERT	ΓΙΓΙCATE?			
HAS THE RENEWAL OF YOUR LICENCE EVER BEEN DEFERRED ON MEDICAL GROUND?						
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NAME	SIGN	NATURE	DATE			