

SOUTH EASTERN UNIVERSITY OF SRI LANKA

FORM OF APPLICATION

Appl	ication to the Post of:		•••••	• • • • • • • • • • • • •	• • • • • • • • • •	•••••	
1.	Name in Full :						
	Name with initials : (Rev./ Mr./ Ms/ Dr/ Pro	of)					
2. i.	Sex: Male		Female				
ii.	Civil Status: Single [Married				
3.	Postal Address:	Permanent Address:					
	Telephone No.:e-mail .			ne No.:			
4.	Date of Birth	Age at Closing Date					
	Year Month	Date		Years	Month	hs Days	
5.	Citizenship: By Desc	cent	By Regis	stration [
6.	National Identity Card	No:					
7.	Education Schools Atte	ended:					
	Name of Scho	From	m	To			

9. Othe	er Diplom	a, Membe	ership, Fe	llowships etc. (attach co	py of certi	ficate)	
J	nstitute			Diploi	na etc.			Year
10. Prof	essional (Qualificati	ons: (atta	ach copy of cert	ificate)			
Institute			From	То		Examination passed or Degree obtained etc		
11. Lang	guage Pro	ficiency (Please tic	: ✓):				
Language	Ability to Wo						Ability to Teach	
	Very good	Good	Fair	No Knowledge	Very good	Good	Fair	No Knowledge
Sinhala								
Tamil								

University Education: First Degree/PG Degree (attach copy of certificate)

To

Course followed

with Subjects (Special/ General) Results

(give class or grade with effective date

Duration

From

8.

Name of the University

				TIVIII		received	Employment		
Post held		neld	Institute	Period of Service From To		Last Monthly Salary	Reason for Cessation of		
	(b)	Previo	us Employment Record	ls:					
			b. <i>A</i>	Allowances :					
		vi. Pre	esent Salary a. E	Basic Salary:					
v. Salary Scale of the post:					y Scale of the post:				
		iv. Pla	iv. Place of work with the Address:						
		iii. Whether confirmed in the present post:							
			te of appointment to su	ch post :					
13.	(a)	i. Po	t Occupation:						
12	()	D							
	(ii)	Researc	ch & Publications:						
12. (1) Professional/ Special Qualifications and Experience:									

14. Any further relevant particulars: (not included above)

15.	15. Two non related Referees:						
	Name	:	Designation	Address			
(i)	• • • • • • •						
	•••••						
(ii)	•••••						
	•••••						
Note:-	One of	f the referees should be	e the Head of the Institution in	which the candidate works.			
16. Paste the cash receipt properly here							
(Paste the receipt here securely) (It would be advisable to keep a photocopy of the receipt with the candidate) 17. I hereby certify that the particulars submitted by me in this application are to							
	liable		selection and to be dismissed	to be false of inaccurate, I am I without any compensation, it			
	Date:.			Signature of Applicant			
For Pu	ublic S	ervice/ Corporation/ S	Statutory Board Candidates	Only			
Submi	tted by		ected for the said post he/ she				
			 Signature	of the Head of the Departmen			
			J	(Official Seal)			
Name		:					
Design	nation	:					
Date		:					
(N.B.:	when d	applying for several po	osts, each post should be appl	ied for separately)			