Ministry of National Policies and Economic Affairs National Human Resources Development Council of Sri Lanka

Post applied for:

- 1. Name in Full : Rev/Mr/Mrs/Miss (underline Surname)
- 2. Permanent Address:

Telephone Nos:

3. Business Address:

		Fax:	E-mail:
4. Date of Birth:			
4 (a) Age as on clo	sing date of application	ons	
Years:	Month:		
		Days:	
5. Civil Status:			
6. Citizenship (State wł	nether by registration)		

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If by registration, give reference number and date of certificate of citizenship. If by descent state the national Identity card No.

6(a) National Identity card No:

7. Secondary Education:

Name of School/College	From	То	Grade

8. University Education (First Degree, Postgraduate Degree(s), Ph.D etc. (Please attach copies of all certificates).

University	From	То	Degree/ Diploma	Results (Give class/Grade)

09. Other Qualifications:

10. Details of Scholarships, Medals, Prizes etc.(If space is insufficient, please use a separate sheet of same size and attached)

^{11.} Research and publications; If space is insufficient, please use a separate sheet of same size and attached)

- 12. (a) Present post and Institution:
 - (b) Date of Appointment:
 - (c) Salary Scale:
 - (d) Salary Step:
- 13. Professional Experience (State previous appointments with post, institution and duration)

on From To

14. Extra Curricular Activities:

(If space is insufficient, please use a separate sheet of same size and attached)

15. Other Information: (Attach Curriculum vitae)

16. Proficiency in Language (Please tick appropriate box)

		W	ritten	Spoken							
	Very Good	Good	Satisfactory	Normal	Weak	Very Good	Good	Satisfactory	Normal	Week	
Sinhala											
Tamil											
English											
Other											

17. Name & address of two non – related referees:

(Give telephone nos. if any)

Name

Address

18. I wish to confirm that the above particulars are true and correct to the best of my knowledge. If any of the particulars are found to be incorrect before or after selection for employment, I am aware them I would be disqualified of be liable for termination of service without compensation.

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Date

Signature of Applicant

FOR PUBLIC SECTOUR CANDIDATES ONLY.

Application for the post ofsubmitted by

.....is forwarded.

If he/she is selected for the said post, he/she can be released.

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Date:

Signature of Head of the Department

Name:	
Designation:	
Date:	
Seal:	