

Application for undergoing the teachers' training courses in teachers' colleges
2018/2019

1. Medium :
2. Date of assumption of duties
as per first appointment letter:
3. Course applies for :
4. Nature of the first appointment, subject and the service / grade you belong to:
- a) Nature of the first appointment:
- | | | | |
|-----------------------------|---|----|----------------------|
| Sri Lanka Teachers' Service | - | 01 | <input type="text"/> |
| Teacher Assistants | - | 02 | |
| Other (pl. mention) | - | 03 | |
-
- b) Subject :
- c) Relevant grade :
5. Name of the **teachers' college** chosen by you for the course (pl. see 2.3 of the instructions leaflet)
1.
2.
6. Name with initials (In block letters. Write the last name first and initials at the end. Ex: PERERA, A.B.):
- Rev./Mr./Mrs./Ms.
7. Names denoted with initials (In block letters)
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8. Sex (write the number in the adjoining cage)
- Male - 1 Female - 2
9. National Identity Card no. :

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10. (a) Date of birth :
- (b) Age at 30/04/2018
- Years: Months: Days :
11. Telephone no. : Home: Mobile:
12. E-mail address (if any):

13. Personal address (In block letters)

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14. 1) Present place of work, its address, and zone (In block letters)

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2) Nature of the place of work (write relevant no. in the adjoining cage)

Government school- 01 Estate School -02 Government approved Pirivena - 03

Government approved Private School - 04 Other - 05

15. Statement of the Applicant :

I do hereby certify that the particulars furnished herewith are true and accurate and no other institutional training is undergone by me.

.....
Date

.....
Signature of the Applicant

16. Recommendation of the Principal

This is to certify the applicant above is an employee of this school and the particulars furnished herewith are true and accurate.

It is agreed to release this teacher from duties if selected for the said teacher training.

.....
Date

.....
Signature and official stamp of the
Principal

17. Recommendation of the Zonal Director of Education

It is agreed to release this teacher from duties, if selected for the said teacher training.

.....
Date

.....
Signature and official stamp of the
Zonal Director

18. Recommendation of the Provincial Director of Education

It is agreed to release this teacher from duties, if selected for the said teacher training.

.....
Date

.....
Signature and official stamp of the
Provincial Director