DEPARTMENT OF ANIMAL PRODUCTION & HEALTH Application for the Post of Tractor Operator in the Semi Technical Service Category of Primary Grade

01.Name with initials: - Mr./Mrs./M	Miss
02. NIC No.	
03. Date of Birth Age as at 21.09.2018	
04. Telephone No.	Fixed Mobile
05.Permanent Address District	
06.Private Address	
07.Gender	
08. Civil Status	
09. Medium in which the candidate	is appearing for the interview
10. Educational Qualifications (Attach Copies of the Certificate	es)

Year	
Subject	Grade

Year	
Subject	Grade

11. Professional Qualifications:	
(Attach copies in proof of qualifications)	
12. Experience:	
(Attach copies in proof of qualifications)	
13. Other Qualifications:	
(Attach copies in proof of qualifications)	
14. Have you ever been convicted of any offence in a c If "Yes" give details.	court of law?
15. Certificate of Candidate: I do certify that the information furnished information furnished herein is found to be false or inc subject to dismissal.	ed above is accurate and true. I am aware that if any orrect I will not be considered for selection or will be
Date :	Signature of the Applicant
Certificate of the Head of the Department	
(Only for applicants already in the government service)	
	who is working in this department is could not be released from the present post held by him/her
	Head of the Department
Designation:	(Place the rubber stamp)
Address:	•
Date :	
*Write-off unnecessary words.	