GENERAL SIR JOHN KOTELAWALA DEFENCE UNIVERSITY APPLICATION FOR THE POSTS OF ADMINISTRATIVE STAFF

For Office Use only	
NIC No	
Applied Post	Assistant Registrar (Legal & Documentation)
01. Full Name (In block letters)	
	Dr/Mr/Ms
Name with initials	
02. a. Permanent Address	
b. Tel No	Residence
	Mobile
c. E-Mail	
d. Fax	

	e. Skype ID				
03.	Date of Birth	Year	Mon	th	Date
04.	Age (as at closing date)	Years	Mont	hs	Days
05.	Civil Status	Mar	rried		Single
06.	Sex	Ma	ale		Female
07.	Sri Lankan Citizenship	By De	escent	Ву	Registration
08.	School/s Attended				
09.	Highest Examination Passed in	Sinhala			
	·	Tamil			
		English			

10. University Education (Basic Degree)

Basic Degree	Effective Date	Awarded Institute	Medium	Special or General Degree	Subjects Followed	Class (Pl. indicate clearly)	Annexure No. (Copy of the Certificate)

11. Postgraduate Qualifications

(if space is insufficient please use a separate sheet)

Degree/Diploma Course	Effective		Full time		Duration				Credits		Annexure No. (Copy of
(by research or by Examination)	Date	Institute Awarded	or part time	From	То	Yrs	Mts	Course work	Research / Thesis	Total	the Certificate)

12. Professional Qualifications

(Chartered Qualifications, Attorney at Law, etc.)

(if space is insufficient please use a separate sheet)

	Educational and professional qualifications							
Sr. No.	Qualification	Effective	Institute Awarded		Duration			Annexure No. (Copy of the
110.	Qualification	Date	nistitute Awarded	From	То	Yrs	Mts	Certificate)

13. a. Present Occupation: (if space is insufficient, please use a separate sheet)

		Nature of work		Period of service		e		Annexure
Place of Work	Designation/Post	assigned	Salary drawn per month	Г	T	Yrs	Mts	No. (Copy of
			per monun	From	То			the Certificate)
								,

b. Previous Occupations: (if space is insufficient, please use a separate sheet)

Sr. No.	Place of Work	Designation/Post		Annexure No. (Copy of Service Letter)			
140.	Title of Work	Designation/10st	From	То	Yrs	mts	Letter)

14. Details of Awards/Scholarships etc.

University/ Institution	Scholarships/ Awards/ Prizes/ Academic Distinctions	Year	Annexure No. (Copy of the Certificate)

eı	mployer/s for Training	/Study Programme:
i.	Institute/s	:
ii.	Nature of Training/	;
	Study Programme	
•••	O11: (D : 1	
iii.	Obligatory Period	÷
iv.	Date of Commenceme	ent:
	of obligatory period	
v.	Date of Expiry of	:
	obligatory period	
vi.	Monetary Value of	÷
	the Bond	
16. R	esearch & Publications	, if any:
(if space	e is insufficient, please	use a separate sheet)
L		

Have you entered in to a Bond/Agreement with any of your previous

15.

	afficient, please use a separate sheet)
	of administrative experience (for Administrative Category)
if space is insu	ıfficient, please use a separate sheet)
1	
ļ	
any other relev	vant facts

20. Names, occupations and addresses of two non related referees

Name	Address	Occupation	Contact No

21. Certification by Applicant

I hereby certify that the particulars submitted by me in this application form are true and accurate. I am aware that if any of these particulars are found to be false or inaccurate, I am liable to be disqualified before selection and to be dismissed without any compensation, if the inaccuracy is detected after appointment.

Further, I have enclosed copies of the following documents. (Please insert " $\sqrt{}$ " mark)

Desc	ription of Document	Attached	Annexure No
1. Bir	th Certificate		
2. NI	C/Passport		
3. Bas	sic Degree Qualifications		
a.	Basic Degree Certificate		
b.	Transcript/ Detailed results sheet		
4. Pos	stgraduate Qualifications		
a.	Postgraduate Degree certificate		
b.	Transcript/ Detailed results sheet		

Description of Document			Attached	Annexure No
5. Au	thentication lett	er from UGC(for foreign Degrees)		
6. Pro	ofessional Qualit	fications		
a.	Certificates/ L	etters		
b.	Special Training			
7. Ser	vice Certificates	;		
Date	:		ature of App	·············licant
22.	To be completed	d by the present employer (If any)		
		/ cannot be released, if selected for the awala Defence University.	e post applie	d at General
	Any Special C	omments :		
Signa Name Desig	e : gnation :			
For C	Office Use Only			
Date	Received			
Elig	ibility	Yes		No
Cate	egory			
If No	o, Reasons			
Assi (Esta	strar/Senior stant Registrar ablishment)			
Shor	nments of the tlisting nmittee			