Ref:	

UNIVERSITY OF JAFFNA, SRI LANKA

APPLICATION FOR THE POST OF CHIEF MARSHAL

1. Personal Informa	tion						
1.1 Full Name							
1 2 Name with Tuit	: al /a						
1.2 Name with Init (Whether Mr./Mr.		••••••	•••••				
1.3 a) Address							
i. Peri	manent	••••••					
		••••••					
ii. Priv	rate	••••••					
b. Telephone	Numban	(i) Land		(ii) Mobile			
·		(i) Lunu		(II) Mobile			
c. Fax Numbe	•	••••••		•••••			
d. Email Addı	ress (it, any)						
1.4 Date of birth		••••••		•			
1.6 Sex		1.7 Civil Status					
1.8 National Identi	ity Card No	••••••					
2. Educational Reco	rds:						
2.1 Undergrad	_						
Name of the Cou	•	ertiticates	should be attache	:a) 			
Bachelor/Postgrad		•	Date of	Effective date	Duration:		
Degree/Diplom	a	with GPA	Commencement		Prescribed period of		
					Registration		
2.2 Professional	Qualification						

(Certified copies of the certificates should be attached)

Institution	Qualifications: Field of specialization	Date of Commencement	Effective date	Duration: Prescribed period of Registration

3.1. ((Pleaso Arme		on the services experience you have rank in Sri Lanka Police with ac	_		
	i)	Designation:				
	ii)	Date of appointm	ent:			
	iii)	Department/Ins	titution and its address :			
	iv)	Nature of Appoin	tment : Permanent / Contro Self Employed	•	•	/
	v)	Present salary	a) Basic :			
	vi) Present monthly e	b) Allowance: earnings/income:			
b)) Al	l previous appointm	nent including those under tr	aining, if any, w	ith dates :	
In	stitu	tion/Department	Post/ Rank of Lieutenant Colonel in Sri Lanka Armed Forces/equivalent rank in Sri Lanka Police	From	То	Salary
3.2.	of i) ii) iii) iv)	experience (Certif	ents/Commendations/Medals Fied copies of the Certificat	tes should be d	attached)	
3.3	v) I		ted service in a government [

7. (Extra Curricular Ac	nvines (cerninea copie	is of the certificates should be attached)
4.1	Sports activities und	ertaken:	
	a.		
	b.		
	c.		
	d.		
4.2) -		
4.3	3		
4.4	,		
4.5	j		
		(AA amb andrin of Doof and	and Dadiadae see see a see a see a see
		(Membership of Professio	nal Bodies) (Certified copies of the certificates should be attached)
5.1			
5.2			
5.3	}		
5.4			
5.5)		
6 Hi	chast aducational a	ualification obtained in	Languages: 1 English
O. Mi	gnesi educational q	udiffication obtained in	
7 NI	ame and address o	f dun mafamaan	3.Singhala
/. IN	ame and address o	T TWO reterees.	
	Details of Referees	Referee 1	Referee 2
1	Full Name:	Referee 1	Rejeree 2
2	Designation:		
3	Designation: Department:		
4.1	Contact No: Official		
4.2	Mobile-		
5	E.Mail :		
6	Address:		
	71441 000		
I do	hereby certify tha	t all particulars stated b	y me in this application are true and accurate, I am
	•	•	be false or inaccurate, I am liable to be disqualified
	•	•	y compensation if the inaccuracy is detected after
	intment.	De dieimiesed without di	y compensation if the massarasy is develored after
чрро.			
Date	;		
Juio		••••	Signature of applicant
T (1).			Company tion / Chattering Describing as attended to
	• •	•	Corporation / Statuary Board this section should be
tilleo	by such Head of th	e Department / Institut	ion.
The	applicant will / will n	ot be released, if selecte	ed for appointment.
			Head of Institution
Name	e ;		
Desid	gnation :		
-	-		

Affix the counterfoil of the bank deposit slip as the proof of the Application Fee
Fee Paid Rs:
Paying Bank (Branch):
Paying Date:
Please affix the bank counterfoil here