



UNIVERSITY OF KELANIYA – SRI LANKA

APPLICATION

Post:

01. Name in Full (BLOCK LETTERS):

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Rev./Dr./Mr./Mrs./Miss (delete whichever is not applicable)

02. Name with Initials :

03. Permanent Address :

.....
.....

Tel:..... Mobile: E-Mail:.....

04. Date of Birth :

(Certified copy of Birth Certificate should be attached)

05. Age as on Closing date of Applications : Year : Months : Days :

.....

06. Civil Status :

07. Citizenship :

(State whether by descent or by registration)

08. National Identity Card No :

(Certified copy of NIC should be attached)

Educational Qualifications

09. G.C.E. O/L Examination:

Year.....		Year.....	
Subject	Grade	Subject	Grade

10. G.C.E. A/L Examination:

Year.....		Year.....	
Subject	Grade	Subject	Grade

Academic Qualifications

11. Academic qualifications **relevant to the applied post**:

Name of the University	Degree or Course Title	Duration	SLQF Level	Effective date	Class/Grade

12. **Other** Academic qualifications:

Name of the University	Degree or Course Title	Duration	SLQF Level	Effective date	Class/Grade

Professional Qualifications

13. Professional qualifications **relevant to the applied post**:

Name of the Institute	Course Title	Duration	NVQ Level	Effective date	Class/Grade

14. **Other** Professional qualifications:

Name of the Institute	Course Title	Duration	NVQ Level	Effective date	Class/Grade

Experience

15. Experience obtained relevant to the applied post

Name of the Employer	Designation	From	To	Period	EPF No.	ETF No.

Other Information

16. Extracurricular Activities & Other relevant information

I hereby declare that the particulars furnished by me in the application are true and accurate. I am also aware that if any particulars contained herein are found to be false or incorrect, I am liable to disqualification if the inaccuracy is discovered before the selection and dismissal without any compensation if the inaccuracy is discovered after the appointment.

Signature of Applicant :

Date :

Certified copies of the relevant certificates and other Documents should be attached to the application to prove the provided information.

For Internal Candidates

Recommendation of the Head of Department / Branch

I recommended the above application and agree / not agree to release the applicant in case he/she is selected for the post.

Signature:.....

Designation:.....

Date ;

Official Stamp

Recommendation of Secretary/ Register/ Director/ Rector

Application for the post of submitted byis forwarded herewith. If she/he is selected for the said post he/she can/cannot be released.

Signature:.....

Designation:.....

Date ;

Official Stamp