

Faculty of Management Studies & Commerce UNIVERSITY OF JAFFNA, SRI LANKA FORM OF APPLICATION FOR TEMPORARY POSITION

	POST :								
	DISCIPLINE :								
1.	Name in Full :								
	(See note below)								
2.	Whether Rev./ Prof./	Dr./ Mr./							
	Mrs./ Miss.								
3.	(a) Postal address (Any changes should be communicated)	ted mediately)							
	(b) Contact No :								
	(c) Telephone :								
	(d) Fax :								
	(e) e-mail address :								
4.	(i) Date of Birth & Age	•							
	(ii) Identity Card No :								
5.	Civil Status :								
6.	University Education (Degree, Field of Specialization)	University Reg. No.	Duration of the Degree with dates	Results (Give class/grade/GPA and effective date)	Name of the University				

• If you were registered as a student in University under any other name please indicate such name within brackets.

7.	a) Present Occupation					
	i. Designation :					
	ii. Date of Appointment :					
	iii. Dept. / Institution and its address :					
	iv. Nature of Appointment : Permanent / Contract / Temporary / Casual /					
	v. a. Salary scale :					
	b. Basic Salary :					
	c. Allowance :					

	b) Previous appointments, if any with dates							
	Department /	Post	Salary scale	Date				
	Institution	1 05t		From	То			
8.	Name of Two persons(with address to whom reference can be made)							
	<u>Name</u> <u>Address</u>							
	1.							
	2.							
	ereby certify that the par	-	-					
	urate. I am aware if any							
liable to be disqualified before selection and to be dismissed without any compensation if the inaccuracy is detected after appointment.								
Date:								
	Signature of applicant							