## UNIVERSITY OF COLOMBO INSTITUTE FOR AGRO-TECHNOLOGY AND RURAL SCIENCES

## WELIGATTA, NEW TOWN, HAMBANTOTA, SRI LANKA. FORM OF APPLICATION

POST OF FARM MANAGER GRADE III			
1. Name in Full : Underline Surname (see note (I) below)			
2. Whether Rev./Mr./Mrs./Miss			
3. Postal Address:     (any change should be communicated immediately)			
4. Telephone Number (if available)	Mobile : Te	1:	
Email Address			
5. Date of Birth & Age:		6. Civil Status :	
7. Whether Citizen of Sri Lanka: (state whether by descent or by registration: if by registration, give reference number & date of certificate of citizenship)			
8. Education - Schools attended (i). (ii). (iii). (iv).	From	То	

9. University Education: (Degrees, Diplomas etc.) University (see note (II) below)	From	То	Course followed (with subjects)	Results (give Class or Grade)

Note (I): If you were registered as a student in a University under any other name, please indicate such name within brackets. Note (II): State Index Number if known and Campus.

10.	Postgraduate qualifications & dates
	of obtaining same :

11. Any other academic distinctions, Scholarships, Medals, Prizes, etc. (indicate the institution from which such awards have been obtained)

12. Research & Publications, if any: (if space is insufficient, please use separate sheet of same size.)		
	<u>I</u>	

13. Highest Examination passed in Sinhala/Tamil :

	4		
14. (a) Present <b>occupation</b> , place, date of appointment and basic salary drawn:			
(b) Previous appointments, if any, with dates:  Department / Institution	Post	From	<u>To</u>
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15. Extra - Curricular activities :			

16. Any further relevant particulars : (not included above) :	

16. (Contd.)

17. In the event of being selected please indicate the latest date on which you would be able to assume duties.

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18. Names of two persons (with addresses) to whom reference can be made:	Name 1	Address	
	Tel. No: e-mail:	Fax No:	
	2		
	 Tel. No: e-mail :	Fax No:	
19. I hereby certify that the particulars submitted by me in this application 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.			
Date:	Siş	gnature of Applicant	
Recommendation of the Head of the Institution (If employed at Higher Educational Institutions, Government Departments and Government Corporations)			
I recommended and forwarded herewith the application of			
Date:	H2	ead of the Institution	
	110	ad of the institution	