

## UNIVERSITY OF VAVUNIYA, SRI LANKA FORM OF APPLICATION

POST : DEPARTMENT / DISCIPLINE :				
1. Name in Full :				
(See note below)				
2. Whether Rev./ Prof./ Dr./ Mr./ Mrs./				
Miss. 2 (a) Dectal address:				
3. (a) Postal address : (Any changes should be communicated immediately)				
(b) Contact No :				
Telephone :				
Fax :				
e-mail address :				
4. (i) Date of Birth & Age :				
(ii) Identity Card No :				
5. Civil Status :				
6. State whether citizen of Sri Lanka by Descent or Registration. If by registration, give Registration No :				
7. EducationSchool attached 1.				
2.				
3.				
8. * University Education (Degree, Diploma etc. and the	Duratio		**	Results
Name of the University and Registration No)	the Degree with dates		Subject/s offered	(Give class/grade/GPA and effective date)

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

<sup>\*\*</sup> If the degree is a special degree, please indicate only the subject in which specialized.

9. Postgraduate Education	
a) Name of the Degree / Diploma with	
Registration No :	
b)Name of the University :	
c) Whether Full time or Part time :	
d)Whether by Course work / Course	
with Research component / By	
Research :	
e) Duration of study with dates :	
f) Field of study and the Title of	
Research :	
g) Effective date of Degree/ Diploma :	
h)Class / Grade / GPA :	
10. Special Qualifications :	
(Professional etc.)	
Scholarships, Medals, Prizes etc. (Indicate the Institution from which	
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(Indicate the Institution from which such awards have been obtained) 12. Research & Publications, if any : (If space is insufficient, please use sep the Journal in which the Publications has	-
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13. Higher Examination passed in Tamil / Sinhala.					
14. a) Present Occupation					
i. Designation :					
ii. Date of Appointment :					
iii. Dept. / Institution and its address :					
iv. Nature of Appointment: Permanent / Contract / Temporary / Casual /					
v. Salary scale :					
a. Basic Salary :					
b. Allowance :					
b) Previous appointments, if any with dates					
Department /	Post		Salary scale	Date	
Institution			,	From	To
c) If you are re	tired from				
Government Service	-				
of retirement, the drawn and the pensi					
d) If your service in a	Government				
Department or a were terminated, giv	•				
15. Extra Curricular activ					

16. Any further relevant particulars.	
(Not included above)	
17.Name of Two persons(with address to wh	
<u>Name</u>	<u>Address</u>
4	
1	
2	

I hereby certify that the particulars submitted by me in this application are true and accurate. I am aware that if any of the 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 : .....

Signature of applicant

18. If the applicant is an employee in a Government / Corporation or Statuary Board this section should be filled by such Head of the Department / Institution.
The applicant will / will not be released, if selected for appointment.
Head of Institution
Name :
Designation :
Date :