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3 Contact D	etails																				
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District :		Province :	

Highest Education Qualification

Academic Qualifications G C E (O/L)

	G C L (O/L)			
5	Subject	Grade	Index No	Year

:

GCE(A/L)

6	Index No :		Year :	
	Subject	Grade	Subject	Grade

University Education (Degrees, Diplomas etc.)(Copies of certificates should be attached)

7	Name of the	University/	Per	iod	Field of	Results	Effective
	Degree/	Institution			Degree	(Indicate	Date
	Diploma		From	То		Class or	
			(dd/mm/yyyy)	(dd/mm/yyyy)		Grade)	

4

Postgraduate Qualifications (Postgraduate Diplomas, Master Degrees, Ph.D. etc.) (*Copies of certificates should be attached*)

8	Name of the Degree/	University/	Per	iod	Subject	Effective		
	Postgraduate Diploma	Institution			Area/s	Date		
			From	То				
			(dd/mm/yyyy)	(dd/mm/yyyy)				

Professional Qualifications (Examination/Memberships of Professional Bodies (Associate/Corporate Membership etc.) (Copies of certificates should be attached)

	<u>Associate/ Corporat</u>	<u>e Membersnip etc.) (<i>Copie</i></u>	s of certificates sho	uiu ve allaciieu)
9	Institution	Name of the	Membership	Effective Date
		Examination/Membership	Category	

Training Programmes/Workshops/Seminars/Conferences participated: (Copies of certificates should be attached)

٦	Name of the Training	Institution	Period
		Institution	T erioù
	Programme/Work shops ets.		

10

11	Special Achievements
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Employment History

(a) Present Post: (Copy of Service certificate or Appointment Letter should be attached)

12	Post	Institution	Per	Describe the work done		
			From (dd/mm/yyyy)	To (dd/mm/yyyy)		

(b) Previous Employment

(Copies of Service certificates or Appointment Letters should be attached)

Post	Institution	Period		Total Service
		From (dd/mm/yyyy)	To (dd/mm/yyyy)	

13

Working Experience

Please explain the key responsibilities handled under each position mentioned above in part (b) in brief

Extra Curricular Activities:

14	Category	Туре	Achievement	Date/Year

Details of two non-related referees:

15	No.	Name & Position	Official Address & Tele. Nos.	Residential Address & Tele. Nos.

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.

Signature of the applicant:		Date:	
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