Application for the post of Provincial Commissioner of Ayurveda to Central Provincial Denartment of Avurveda

01. Name with initials: (Mr. /					
02. i. Post held at present :		•••••			
ii. Service and Grade:	•••••				
iii. Current Service Statio					
03. Personal Address:					
04. Sex:					
05. i. Date of Birth:					
ii. Age as at 28.12.2022:					
06. N.I.C. No.:					
07. Contact No					
i. Personal:		ii. Official:			
08. i. First appointment date:					
ii. Date of confirmation in	service:				
iii. Date of promotion / abs	orption to Adn	ninistrative Grad	e I (attach the cop	y of the letter):	
iv. Period of Active Service	e in Administra	ative Grade I as	at the closing date	of application (2	28.12.2
Years	Months .		Days		
09. Particulars on no-pay lea Lanka Ayurvedic Medica		uring the period	l of service in Ad	lministrative Gr	ade I
From	To	Years	Months	Days	
		1	1	1	1
					\dashv

No. Order	Degree/ Post graduate Diploma/ Post graduate Degree	Subject field	University/ Training Institute	Effective date

11. Details of professional experience gained during the period of service in Administrative Grade I of Sri Lanka Ayurvedic Medical Service

Post held	Institution	period	
		From	То

12. Annual Performance Appraisals

Details on rating obtained in performance appraisal during the period of five years immediately prior to the closing date of application on 28.12.2022 (cross off irrelevant words)

Year	Rating obtained in performance appraisal
2018	Excellent / Above average / Satisfactory
2019	Excellent / Above average / Satisfactory
2020	Excellent / Above average / Satisfactory
2021	Excellent / Above average / Satisfactory
2022	Excellent / Above average / Satisfactory

13. Details of Training Courses

No order	courses	Time period	Institute

I do hereby certify that no any disciplinary inquiry is being held against me, not subjected to any

(Place official stamp)

Recommendation of the Secretary to the Ministry

Date :	
	Signature of the Secretary of the Ministry
	Name
	(Place official stamp)
December of Chief Secretary of the Durvines (e	uls for effective sub-characteristics
Recommendation of Chief Secretary of the Province (or Central Provincial Council)	nly for officers who have been absorbed to
Central Frovincial Councily	
Date :	
	Signature of Chief Secretary
	Signature of Chief Secretary
	Name
	(Place official stamp)