

Application for the post of

General Instructions for Completing the Application:

- Please use clear and legible handwriting and write in **blue ink**.
- The application must be completed in the **English language**.
- Use **only the prescribed application format** provided.
- Applications submitted in **any other format**, including CVs, or those that are **unclear or incomplete, will be rejected**.

01. PERSONAL INFORMATION

This section is for office use only.

Status: (Underline the correct status)

Name in Full:

Name with initials:

Date of birth: / /
(DD/ MM/ YYYY)

Age as at the closing date of the application: Yrs M D

Nationality:

Gender:

National Identity Card Number (NIC):

02. CONTACT INFORMATION

Permanent address:

Temporary address (*If different from permanent address*):

Contact details:

E-mail address:..... (*Use correct spelling and email format*)

Two contact numbers: (*Provide two active contact numbers*)

(1)										
(2)										

03. Qualifications:

G.C.E. (Ordinary Level) Examination

Index No:.....

	Subject	Grade	Year of obtaining the grade		Subject	Grade	Year of obtaining the grade
1)				6)			
2)				7)			
3)				8)			
4)				9)			
5)				10)			

G.C.E. (Advanced Level) Examination

Stream:.....

Index No:.....

	Subject	Grade	Year of obtaining the grade		Subject	Grade	Year of obtaining the grade
1)				3)			
2)				4)			

Vocational/Professional Qualifications

Qualification	Time Period	Institute	Result	Effective date

Work Experience (If any)

Designation	Organization	Period	Start date	End date

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ANY OTHER QUALIFICATIONS *(If any)*

.....
.....

EXTRA-CURRICULAR ACTIVITIES *(If any)*

.....
.....

TWO NON-RELATED REFEREES

Name	Designation and Organization	Contact Numbers	Email
(1)			
(2)			

DECLARATION OF THE APPLICANT

I hereby declare and certify that the information provided in this application is true and accurate to the best of my knowledge. I accept responsibility for any incomplete or incorrect details and understand that any false or misleading information may result in disqualification.

I shall not alter the information in the future.

Date:..... Signature of Applicant :.....