

**OFFICE ON MISSING PERSONS  
APPLICATION FORM**

Position/ Post :

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**1.0 PERSONAL DETAILS:**

1.1 Name with initials at the end (In English block capitals):-.....

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1.2 Name in full (In English block capitals):-.....

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1.3 Name in full (Sinhala / Tamil) :-.....

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1.4 Permanent Address (Sinhala / Tamil):-.....

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1.5 Permanent Address (In English block capitals):-.....

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1.6 Gender :-.....

1.7 Marital status :-.....

1.8 Nationality :-.....

1.9 National Identity Card No:-

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1.10 Date of Birth :- Date

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Month

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Year

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1.11 Telephone No:-

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1.12 Email Address :-.....

1.13 District :-.....

**2.0 EDUCATIONAL QUALIFICATIONS:**

**( Bachelor Degree )**

2.1 Ordinary Level (O/L) Examination : Year :-.....Index No :-.....

Subject	Grade	Subject	Grade

2.2 Advanced Level (A/L) Examination : Year :-.....Index No :-.....

Subject	Grade

- 2.3 (i) Date of Graduation :-.....
- (ii) University / Institution :-.....
- (iii) Internal / External :-.....
- (iv) Degree :-.....
- (v) Subjects :-.....  
.....
- (vi) Class :-.....  
Upper / Lower : .....
- (vii) Effective Date :-.....
- (viii) Language Medium of Examination :-.....

**( Master Degree )**

- 2.2 (i) Date of Graduation :-.....
- (ii) University / Institution :-.....
- (iii) Degree :-.....
- (iv) Subjects :-.....  
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- (v) Class :-.....
- (vi) Effective Date :-.....
- (vii) Medium of Examination :-.....

**3.0 PROFESSIONAL QUALIFICATION:** .....

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**4.0 OTHER QUALIFICATIONS:** .....

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**5.0 WORKING EXPERIENCE:** .....

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**6.0 NON – RELATED REFEREES**

Name and Telephone No	Position	Address

**7.0 Declaration of the Applicant:**

(a) I respectfully declare that the particulars furnish by me in this application are true and correct to the best of my knowledge. I agree to bear the loss which may occur due to incomplete and / or incorrect completion of any part of this application. Further, I state that, all contents of this application are true and correct to the best of my knowledge.

(b) I shall not subsequently change any information stated above.

.....  
Date

.....  
Applicant's Signature

**8.0 (This part is applicable only for candidates who engage in government employment)**

**Attestation of the Head of the Department/ Institution :**

I hereby certify that Mr./Mrs./Miss..... who is working on Permanent basis/ Contract basis/ Casual/ Temporary basis in this ministry/department/institution, in the post of ..... Since..... and his/her work and conduct are satisfactory, no disciplinary action pending against him/her and no decision has been taken to impose any such in the future. If he/she will be selected for this post, he/she can/cannot be release from the service.

Signature of the Head of the Department :

Name :

Designation :

Ministry/ Department :

Date :