Post applying for	Annexure 1			
	For office use			

APPLICATION FORM (For Supporting Staff Posts)

Application for the post of
2) Name with Initials (In Sinhala)
මයා/මිය/මෙනවිය (In English / Block capital letters) Mr./ Mrs. / Miss:
3) Names denoted by the initials (In Sinhala) (In English / Block capital letters)
4) Nationality:
5) Gender: Female / Male:
6) National identity card No:
7) Date of birth:
8) Age: [] [] [] [] [] [] [] [] [] [

Telephone No Mobile No E - Mail 10) Educational Qualifica G.C.E. O/L No Subject	tions: . (අ.මපා.ස. /		Telepl Fax No E - Ma	0	No			
Mobile No E - Mail 10) Educational Qualifica G.C.E. O/L			Fax No	0	No			
Mobile No E - Mail 10) Educational Qualifica G.C.E. O/L			Fax No	0	No			
Mobile No E - Mail 10) Educational Qualifica G.C.E. O/L			Fax No	0	No			
E - Mail 10) Educational Qualifica G.C.E. O/L								
10) Educational Qualifica ■ G.C.E. O/L			E - Ma	il				
■ G.C.E. O/L								
■ G.C.E. O/L								
	. (අ.මපා.ස. /							
No Subjec		සා.මපළ)						
No Subjec				Grade				
1 1	t	1 st Attempt 2 ⁿ			2 nd Attempt			
01			Index No:		Index No:			
02				+				
03								
■ GCE A/L (a	අ.පො.ස. /උ	.පෙළ)						
		Grade						
No Subjec	Subject		1 st Attempt		2 nd Attempt			
			Index No:		Index No:			
01								
02								
03								
11) Other Ovelifications	/Dansa / D): / <i>C</i>					I	
11) Other Qualifications	- (Degree/ L	лріота/ С	ertificates/	ıraınır	igs etc.)			
No Course Name		evel (If	Subject / Relevant Field		Validity	University/Institut		
01	Any)		Kelevant Fl	eiu	Date			
01								
01 02								

Office details:

9) Residence details:

12) Experiences	Gained:						
I. Permanent Appointment Date:							
II. Designation:							
III. Confirmation Date:							
Position	Institu	ition Pe	eriod (From – to	0)	No of Years		
13)Details of pr	evious releasem	ent from the	e substantive p	oost – if any			
Name of the Project / Institution			on some some some some some some some some		asement bas	sement basis	
				Full time (with full - Pay)	Full time (with No - Pay)	Acting	
I II III	Letters regarding		ce (Attach pho	otocopy)			
13) Cei tilicatio	on of the Applic	ant					
details about for the information p eligible to the po	ve read the Notice this application. To provided by me in st if the informati d regulation whicl	There are no this applicat on I have pro	judicial proceed ion it true and d ovided is found	dings against correct. I am to be incorre	me and I cert aware that, I ct and I have	tify that am not bound	
Date:			 S	ignature of ap	pplicant		

17) Recommendation of the Head of the Institution (For Government, Semi- Government officers and Permanent Officers)

01.	I hereby certify that Mr./Mrs./Miss personal file,	who is	submitte	d this a	(Name		olicant)
	PF Number		(110	Sent Employii			
=	Permanent Des	ignation					
-	First Appointm	ent Date					
=	• Confirmation D	ate					
02.	Employment Pl (Substantive post him/her and there	ace) as of the app	alicant) and r	= =	action has		
US.	Name of the Project / Institution	Position held	Time duration from-to	No of years	Releasement basis		
	moticution		Trom to		Full time (with full - Pay)	Full time (with No - Pay)	Acting
	Also, His/ her pretable are confirmed				bstantive pos	t that are in	above
04.	After considering a No: 1/2019, He/ S 2.3.3 (a) – Fulltime no pay leave basis, releasement period to this post.	She could be releaseme /2.3.3 (c) -	e released ar nt with full p Acting release	nd agreed to b ay basis/2.3.3. ement basis fo	e released acc (b) – Fulltim r the	cording to the releasement(I	ne Para nt with Further
Date	2:				and seal of H		