

Specimen Application Form

Open Competitive Examination for Recruitment to the Post of Technological Service (Civil)
Grade III / One Year Training Grade / Two Years Training Grade in Central Provincial Public
Service– 2025

Index No.

(Indicate the relevant code in the cage)

(For office use only)

Medium Applied for:

(Sinhala -2, Tamil -3, English - 4)

Post:

Code denoted for Post:-
(As per Para. 8.2 of the notice)
(Put mark ✓ in relevant cage)

01 -C	<input style="width: 40px; height: 20px;" type="text"/>
02 -C	<input style="width: 40px; height: 20px;" type="text"/>
03 -C	<input style="width: 40px; height: 20px;" type="text"/>

Residential District:

1. 1.1 Name with initials at the end:
(Mr./Mrs./Miss) (in English capital letters eg. SILVA A.B.C.D.)
- 1.2 Name with initials:
(In Sinhala/Tamil)
- 1.3 Name denoted by initials:
(In English capital letters)
- 1.4 Name denoted by initials:
(In Sinhala/Tamil)
2. 2.1 Permanent Address: -
(In Sinhala/Tamil)
- 2.2 Address to which the admission should be sent: -
(In Sinhala/Tamil)
- 2.3 Address to which the admission should be sent: -
(In English capital letters)
- 2.4 Official Address, if currently in public service:
- 2.5 National Identity Card No.

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- 2.6 Sex :- Male- 0, Femal – 01
3. 3.1 Date of Birth:

Y	Y	Y	Y	M	M	D	D
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- 3.2 Age as at the closing date of applications (09.01.2026):- years..... months Days
- 3.3 Telephone Nos.
Mobile:

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 Fixed:

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- 3.4 Email Address: -

4. Civil Status (Unmarried -1, Married - 2) (Indicate the relevant code in the cage)

5. 5.1 Pemanet Residential District :

(If applicant's spouse possesses a permanent residents within Central Province immediately preceding 03 years, mention his/her details)

* if spouse possess permanent residents within Central Province immediately preceding 03 years, put ✓ mark in the cage

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Accordingly to electoral register	2022	2023	2024
Electorate District			
Electorate			
Polling Division			
Grama Niladari Division			
Residential No.			
Number order in front of the name			

6. Educational Qualifications :-

6.1. G.C.E. (O/L) Examination:

Year:

Index No.:

6.2 G.C.E. (A/L) Examination:

Year:

Index No.:

Subject	Grade

Subject	Grade

7. Professional (Technological) Qualifications

Institution	Course followed	Effective date of the Course	NVQ level	NVQ Certificate No	Effective date of the certificate

8. Particulars on applicant's former employments (If applicable)

Department/Institution	Post held	Period		Annual Salary
		From	To	

9. Particulars of examination fee of Rs. 600/- :-

- i. Divisional Secretary Office/ People's Bank Branch to which the payment was made
.....
- ii. Date.....
- iii. Receipt number

Affix the receipt/ Bank receipt in this cage firmly
(It would be advisable to keep a photocopy with the candidate)

10. Have you ever been convicted of any offence in the Court of Law? (Yes/No) :.....
If yes, give details:

11. Candidate's Certificate :

I certify that the particulars given in this application are true and correct. I am also aware that if any particulars contained herein are found to be false or incorrect, I am liable to be disqualified before selection or to be dismissed without any compensation if such detection is made after selection. Furthermore, I agree to be bound by rules and regulations of the Secretary of the Central provincial Public Service Commission regarding the conducting of the examination.

Date :

.....
Signature of the applicant

12. Attestation of Applicant's Signature :

I certify that Mr./Mrs./Miss who forwards this application is personally known to me and he/she placed his/her signature today in my presence. I also certify that he/she has paid the due examination fee and has attached the paid receipt.

Date: -

.....
Signature of Attester

Full name of Attester :
Designation :
Address :
(Place official Stamp)

13. Certificate of the Head of Department (for applications who are currently in Public/ Provincial Public Service):

I do hereby submit the application of Mr./ Mrs./ Miss

Further, it is hereby informed that he/ she is serving as in a permanent/temporary/ casual post of this Ministry/ Department/ Institute and he/ she can be released from service, if selected for this post.

.....
Signature of the Head of the Department or Institute
(Place official Stamp)

Date