

PARLIAMENT OF SRI LANKA Specimen Application Form

		Post of					
01.	(a)	Name with initials (in English):					
0 2.	(b) Names denoted by initials (in English):						
02.		National Identity Card Number					
03.	(a)	Private Address:					
		Telephone No:					
	(b)	Official Address:					
		Telephone No					
	(c)	Please indicate the address to which the admission should be posted. Private Office					
04.	(a)	Date of birth:(A copy of the birth certificate should be attached)					
	(b)	Age as at closing date for applications: Years: Months: Days:					
05.	Civil	Civil Status: (Married/Unmarried)					
06.	Gender: (Male/Female)						
07.	State whether a citizen of Sri Lanka: (Yes/No)						
08.	8. Educational and Higher Educational Qualifications: (Copies of the certificates should be attached)						

 . Exn						
. Exp						
Р	Experience (Copies of the Certificates should be attached)					
	Institution	Post	Service Period			
	ails of Present Employ					
(a) (b)						
(c)	Present Post:					
(d)		y:				
(e)						
(f)	Gross Salary:					
	Have you been convicted for a criminal offence by a Court of Law? (Yes / No)					
If yo	If yes, give details:					
Hav	Have you served under the Government before? (Yes / No)					
	If yes, give details:					
	I do hereby certify that all the particulars furnished by me in this application					
	true and correct. I am also aware that, I am liable to be disqualified for this any particulars contained herein are found to be false or incorrect before se					
	or to be dismissed without any compensation if such detection is made					
	appointment.					
Dat	e:	******				
-			ure of the Applicant			

Certification of Head of Department/Institution

(Only for applicants serving in the Public Service/Provincial Public Service)

Secretary - General of Parliament,	
holding the post ofbeen confirmed in this post and his/her what not been subjected to any disciplination.	ion of Mr / Mrs /Miss in this Institution. I certify that he/she has work and conduct are satisfactory and that he/she ary action or there is no intention to make such e released from the service if selected for this post. (s.)
Date:	
	Signature of Head of Department/Institution
	(Official Stamp)