

Model Application Form

MINISTRY OF ENVIRONMENT

Recruitment on limited basis for the post of Cost Conservation Guard Grade III of the Management Assistant Non-Technical, Group 2 Service category of the Department of Coast Conservation and Coastal Resources Management

01. 1.1 Name in Full (in English block letters) :
.....
(E.g.: HERATH MUDIYANSELAGE SAMAN KUMARA GUNAWARDANA)

1.2 Name using first name at the beginning, initials of the other names later (in English block letters) :
.....
(E.g. : GUNAWARDANA H.M.S.K.)

02. 2.1 Address of the permanent residence (in English block letters)
.....

2.2 Divisional Secretariat Division :

2.3 Grama Niladhari Division :

2.4 Mobile Telephone Number :

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03. 3.1 National Identity Card Number :

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3.2 Date of Issue :

04. 4.1 Gender :

Male - 0

Female - 1 (Write the relevant Number in the box)

05. 5.1 Date of Birth :

Year:

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Month :

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Date:

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5.2 Age as at the closing date of the application :

Years :

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Months :

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Dates :

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06. 6.1 You are a citizen of Sri Lanka by :

Descent - 1

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Registration - 2 (Write the relevant Number in the box)

6.2 Ethnicity :

Sinhala - 1

Lanka Tamil - 2

Indian Tamil - 3

Moors - 4

Burgher - 5

Other - 6

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 (Write the relevant Number in the box)

07. Whether Married / Unmarried / Widowerhood: Married
Un married
Widowhood

08. 8.1. Name of the present place of work :
8.2. Name of the present post :
8.3. Date of appointment to the present post :
8.4. Date of confirmation in the present post :
8.5. Date of completion of permanent and active period of service in the present post :
.....

09. Have you been convicted in a Court of Law ? :
If so, provide reasons :

10. Passes of the G. C. E. Ordinary Level Examination :

Year : Index Number අංකය :	
Subject	Pass

Year : Index Number අංකය :	
Subject	Pass

11. Passes of the G. C. E. Advanced Level :

Year :Index Number :	
Subject	Pass

12. Other Educational Qualifications :
.....

13. Statement / Certification of the Applicant :

I hereby certify that all the information furnished by in this application is true and accurate. I know that If any information mentioned here is found to be false before my selection to this post I will be disqualified, and if found after my selection I will be subject to dismissed from service without any compensation.

.....
Signature of the Applicant

Date :

Should be filled by the Head of the Department.

01. Whether any disciplinary action has been taken / intended to be taken in the future against this officer within the preceding 05 years? Yes / No

02. If the answer is “Yes” What action was taken in that regard ?
.....
.....

03. Has the officer obtained no pay leave within his period of service? Yes / No

04. If the answer is “Yes” How many no pay leave had been taken?

<i>Serial No.</i>	<i>Relevant condition for leave approval</i>	<i>Duration</i>	
		<i>From</i>	<i>To</i>
i.	< V: 2:5:4 of the Establishment Code		
ii.	< XII:16 of the Establishment Code		
iii.	Management Circular No.10		
iv.	Management Circular No 33		
v.	<XII:36 of the Establishment Code		
vi.	Other No Pay leave		

The application of Mr.holding the post of
..... in this Department is recommended

Date :-

.....
Signature of the Head of the Department
Official Seal