



RAJARATA UNIVERSITY OF SRI LANKA
FORM OF APPLICATION

POST :-

- 01' (a) Name with initials :
.....
- (b) Names denoted by initials :
.....
02. Whether Mr./Mrs./Miss :
03. (a) Postal Address :
(Any changes should be communicated
immediately)
- (b) Contact Telephone No. :
04. National Identity Card No. :
05. (a) Date of Birth :
- (b) Age as at the closing date of applications :
06. Civil Status :
07. Whether Citizen of Sri Lanka :
(State whether by decent or by registration)
If by registration give reference number &
date of certificate of citizenship
08. Race :
(State whether Sinhala, Tamil or Muslim)
- 10 Gender :

09. Education – School attended

From

To

(1)

(2)

10. (a) School Education

(i) G.C.E. (Ordinary Level)

Year :-

Index No.:-

S.No.	Subject	Grade
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

G.C.E. (Ordinary Level)

Year :-

Index No.:-

S.No.	Subject	Grade
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

(ii) **G.C.E. (Advanced Level)**

Year :-

Index No.:-

S.No.	Subject	Grade
1		
2		
3		
4		

G.C.E. (Advanced Level)

Year :-

Index No.:-

S.No.	Subject	Grade
1		
2		
3		
4		

(b) **University Education:-**

University	Degree/Diploma	Class	Date of Commencement	Effective date	Duration
1.					
2.					

(c) **Professional Qualifications:**

Institution	Course	Date of Commencement	Effective date	Duration
1.				
2.				

11. Highest examination passed in Sinhala and English

Sinhala:

English:

12. Period of experience gained as at the closing date of applications relevant to the post applied:

13. Extra Curricular Activities:

14. Names of two non related referees with address and contact Nos.

1.Name

Post

.....

.....

Adress

Contact No.

.....

.....

.....

.....

2.Name

Post

.....

.....

Adress

Contact No.

.....

.....

.....

.....

I do hereby certify that particulars submitted by me in this application are true and accurate. I am aware that if any of these particulars are found to be false or inaccurate, I am liable to be disqualified before selection and to be dismissed without any compensation if the inaccuracy is detected after appointment.

Date:

.....

Signature of applicant

Registrar
Rajarata University of Sri Lanka
Mihintale

I hereby certify that the particulars given in columns 01 to 14 of this application are correct according to the candidate's personal file.

Checked by:
Personnel Clerk

.....
Signature of the Head of the
Personnel Department

If the above candidate is selected, he/she can/cannot be released from this Department/ Corporation/Statutory Board.

Date:

.....
Head of the Department/Institution
Official Rubber Stamp