

07. Gender :

Male - 0

Female - 1

(Write the relevant number in the cage).

08. Mobile No. :

09. National Identity Card No. :

10. State whether a citizen of Sri Lanka :

Yes - 1

No - 2

(Write the relevant number in the cage)

11. Date of Birth :

Year : Month : Date :

12. Age as at 08th of May, 2023.

Years : Months : Dates :

13. I. Professional and other qualifications :

II. Highest qualification in second language :

III. Highest qualification in first language :
(The years and the grades (Credit/Distinction) of G.C.E. (A/L/ O/L) examinations should be mentioned.)

IV. (a) Degree Qualifications :

<i>Degree</i>	<i>Subjects</i>	<i>Grade</i>	<i>Year</i>	<i>University</i>

(b) Post Graduate Qualifications:

<i>Post Graduate Degree</i>	<i>The year in which the degree was awarded</i>	<i>University</i>

V. Experience in the profession of an Attorney-at-Law :

(A service letter should be attached.)

14. I. Have you ever been convicted by a Court of Law for any offence? Yes/No

If yes, explain :

II. Examination Fee :

Receipt No :

Date of the payment :

Bank and the Branch where the fee was paid :

Affix the receipt properly here

15. Certificate of the Candidate :

- (a) I do hereby respectfully declare/pledge that the particulars furnished above are true and accurate to the best of my knowledge.
- (b) I am aware that the statement in the application if found to be false or inaccurate will make me liable for disqualification if it is found before the selection and for dismissal if found after the selection. Further, I declare that I am bound to the rules imposed by the Commissioner General of the Department of Examinations and that I have affixed the receipt of payment of the examination fee.

Date :

.....
Signature of the Applicant

16. I. Attestation of the signature.

I do hereby certify that Mr./Mrs./Miss. (full name) who is forwarding this application is personally known to me and he/she placed his/ her signature in my presence on 2023 and he/she has paid the examination fee and affixed the relevant receipt.

.....
Signature of the Attestor

Full name of the attestor :
Position :
Address :
Date :
(Affix the official stamp here)

II. Certificate of the Head of the Department

I certify that the particulars furnished by the applicant above have been checked by me and the said particulars are accurate and his/her performance, attendance and conduct are in a satisfactory level. This officer, if selected, can/ cannot be released from his/her present post.

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

Designation :
Date :
(Affix the official stamp)