GENERAL SIR JOHN KOTELAWALA DEFENCE UNIVERSITY
APPLICATION FOR THE POST OF TEMPORARY ACADEMIC SUPPORT STAFF

For Office Use only	

NIC No	
Applied Post (Please put " √ " mark on the box)	☐ Temporary Tutor
Faculty	
Department	
Preferred Field of Teaching (Specialized area)	
Other fields interested to teach	

01. Full Name (In block letters)	
Name with initials	Dr/Mr/Ms
02. a. Permanent Address	
b. Tel No	Residence
	Mobile
c. E-Mail	
d. Fax	
e. Skype ID	

03. Date of Birth

Year	Month	Date

04. Age (as at closing date)

Years	Months	Days

05. Civil Status

Married	Single

06. Gender

Male	Female

07. Sri Lankan Citizenship

By Descent	By Registration

08. School/s Attended

09. Highest Examination Passed in

Sinhala	
Tamil	
English	

10. University Education (Basic Degree)

Basic Degree	Effective Date	Awarded Institute	Medium	Special or General Degree	Subjects Followed	Class (Pl. indicate clearly)	Annexure No. (Copy of the Certificate)

11. Postgraduate Qualifications
(if space is insufficient please use a separate sheet)

Degree/Diploma Course (by research or by Examination)	Effective Date	InstituteAwarded	Full time or part time	Duration				Credits			Annexure No. (Copy of the Certificate)
				From	To	Yrs	Mts	Course work	Research / Thesis	Total	

12. Professional Qualifications
(PGIM Board certification, Chartered Qualifications, Attorney at Law, etc.)
(if space is insufficient please use a separate sheet)

	Educational and professional qualifications							
Sr. No.	Qualification	Effective Date	Institute Awarded	Duration				Annexure No. (Copy of the Certificate)
				From	To	Yrs	Mts	

13. a. Present Occupation: (if space is insufficient, please use a separate sheet)

Place of Work	Designation/Post	Nature of work assigned	Salary drawn per month	Period of service				Annexure No. (Copy of the Service Letter)
				From	To	Yrs	Mts	

b. Previous Occupations: (if space is insufficient, please use a separate sheet)

Sr. No.	Place of Work	Designation/Post	Period of Service				Annexure No. (Copy of Service Letter)
			From	To	Yrs	Mts	

14. Details of Awards/Scholarships etc.

University/ Institution	Scholarships/ Awards/ Prizes/ Academic Distinctions	Year	Annexure No. (Copy of the Certificate)

15. Research & Publications, if any:
(if space is insufficient, please use a separate sheet)

16. Extra-Curricular Activities
(if space is insufficient, please use a separate sheet)

17. Any other relevant facts

18. Have you entered in to a Bond/Agreement with any of your previous employer/s for Training/Study Programme:

i. Institute/s : ----------
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ii. Nature of Training/ Study Programme : ----------

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iii. Obligatory Period : ----------

iv. Date of Commencement: of obligatory period ----------

v. Date of Expiry of obligatory period : ----------

vi. Monetary Value of the Bond : ----------

19. Names, occupations and addresses of two non related referees

Name	Address	Occupation	Contact No

20. Certification by Applicant

I hereby certify that the particulars submitted by me in this application form 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.

Further, I have enclosed copies of the following documents. (Please insert " √ " mark)

Description of Document		**Attached**	**Annexure No**
1. Birth Certificate			
2. NIC/Passport			
3. Basic Degree Qualifications			
a.	Basic Degree Certificate		
b.	Transcript/ Detailed results sheet		
4. Postgraduate Qualifications			
a.	Postgraduate Degree certificate		
b.	Transcript/ Detailed results sheet		
5. Authentication letter from UGC(for foreign Degrees)			
6. Professional Qualifications			
a.	Certificates/ Letters		
b.	Special Training		
7. Service Certificates			

Date :…….

…….
Signature of Applicant

21. To be completed by the present employer (If any)

Applicant can/ cannot be released, if selected for the post applied at General Sir John Kotelawala Defence University.

Any Special Comments : .....

.....
Signature
Name : .....
Designation : .....
Date : .....

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Date Received		
Eligibility	Yes	No
Category		
If No, Reasons		
Registrar/Senior Assistant Registrar (Establishment)		
Comments of Head/Dean		