APPLICATION FORM - EXTERNAL

Position Applying: Post of Junior Manager/ IT (Software)

1. Educational Qualifications:

1.1 Bachelor's Degree

Degree	University/ Institute	Valid	Copy of the certificate
_		Date	to be attached
			Annexure ()
			Annexure ()

1.2 Master's Degree

Master's Degree	University/ Institute	Valid	Copy of the certificate
_		Date	to be attached
			Annexure ()
			Annexure ()

1.3 Diploma/ Higher Diploma

Diploma/	University/		Duratio	Copy of the	
Higher Diploma	Institute	From	То	No. of months/ Years	certificate to be attached
				Tours	Annexure ()
					Annexure ()
					Annexure ()
					Annexure ()
					Annexure ()

1.4 Certificate Courses

Certificate	Institute		Copy of the		
Course		From To No. of		No. of	certificate to
				months/	be attached
				Years	
					Annexure ()
					Annexure ()
					Annexure ()
					Annexure ()
					Annexure ()

2. Professional Qualifications:

Membership obtained	Institute	Valid Date	Copy of the
_			certificate to be
			attached
			Annexure ()

3. Work Experience:

Years &	Years & Months		Organization	Copy of the
From	To			certificate to be
				attached
				Annexure ()

Signature of the applicant	Date					
22 22-y 24-10 1. 201 1. 101 201 1. 101 201 201 y 0 41 Minu Continue Continu						
of my knowledge and forward the same for your kind consideration.						
do hereby certify that the above particulars furnished by me are true and correct to the best						

APPLICATION FORM - INTERNAL

Post Applying: Post of Junior Manager/ IT (Software)

Employee Deta	ails								
1.1 Name:									
•••••	•••••	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		• • • • • •		•••••	
1.2 EPF Numbe	er:								
1.3 Division:									
••••••	•••••	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •		• • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	
1.4 Designation	:								
Educational Qu	ualificatior	าร							
2.1 Bachelor's l	Degree								
Degr	ee	Univ	ersity/ Insti	tute	Val	id	Copy	of the certificate	
_			•		Dat	te	to	to be attached	
							Annex	ure ()	
							Annex	ure ()	
2.2 Master's De Master's I		Univ	ersity/ Insti	tute	Val Da	-		of the certificate be attached	
							Annexure ()		
							Annex	are ()	
2.3 Diploma/ H Higher		loma rersity/		Du	ration			Copy of the	
Diploma/	Ins	titute	From	Т	. 0		o. of	certificate to	
Diploma							onths/ ears	be attached	
								Annexure ()	
								Annexure ()	
								Annexure ()	
								Annexure ()	
2.4 Certificate (Courses								
	Ins	titute		Du	ration				
İ		-	i					i	

The Sri Lanka Tourism Development Authority

Certificate	From	To	No. of	Copy of the
Course			months/	certificate to
			Years	be attached
				Annexure ()

3. Professional Qualifications:

Membership obtained	Institute	Valid Date	Copy of the
			certificate to be
			attached
			Annexure ()

4. Work Experience:

4.1 Work experience prior to SLTDA

Years &	Years & Months		Organization	Copy of the
From	From To			certificate to be
				attached
				Annexure ()

4.2 Work experience at SLTDA

	Duration		Division	Position	Category	Grade
From	То	No. of years & months				

The Sri Lanka Tourism Development Authority

Signature of employee	Date
of my knowledge and forward the same for your kind	d consideration.
I do hereby certify that the above particulars furnished	d by me are true and correct to the best