



CIVIL AVIATION AUTHORITY OF SRI LANKA

Application for employment as Civil Aviation Assistant

APPLICANT'S GENERAL INFORMATION											
Last Name				First Name				Middle Name			
Date of Birth	Date :	Month:	Year:	Sex: Male <input type="checkbox"/>	Female <input type="checkbox"/>	Social Status: Single <input type="checkbox"/>				Married <input type="checkbox"/>	Divorced <input type="checkbox"/>
Address of the Permanent Residence											
City			Grama Seva Division			Electorate			District		
Phone	Land Line				E-mail Address						
	Mobile										
National Identity Card No						Passport Number					
Language Proficiency											
		Reading			Writing			Speaking			
Sinhala											
English											
Tamil											
Other (specify)											
Are you a citizen of Sri Lanka?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in Sri Lanka?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Had you been Employed earlier?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when and where?					
Have you ever been convicted of a crime?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain					
EDUCATION											
General Certificate of Education (Ordinary Level) Examination											
First Sitting					Second Sitting						
Year			Index No.			Year			Index No.		
	Subject		Grading			Subject		Grading			
1.					1.						
2.					2.						
3.					3.						
4.					4.						
5.					5.						

6.			6.		
7.			7.		
8.			8.		
9.			9.		
10.			10.		

General Certificate of Education (Advanced Level) Examination

First Sitting

Second Sitting

Year	Index No.	Subject	Grading	Year	Index No.	Subject	Grading
1.				1.			
2.				2.			
3.				3.			
4.				4.			

Other Qualifications

REFERENCES

Please list three professional references.

Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	

PREVIOUS EMPLOYMENT

Organization:	Phone:	
Address:	Supervisor:	
Job Title:	Starting Salary Rs:	Ending Salary Rs
Responsibilities:		
From:	To:	Reason for Leaving:
May we contact your previous supervisor for a reference?: YES <input type="checkbox"/> NO <input type="checkbox"/>		
Organization:	Phone:	
Address:	Supervisor:	

Job Title:	Starting Salary	Rs:	Ending Salary	Rs:
Responsibilities:				
From:	To:	Reason for Leaving:		
May we contact your previous supervisor for a reference?: YES <input type="checkbox"/> NO <input type="checkbox"/>				
Organization:			Phone:	
Address:			Supervisor:	
Job Title:	Starting Salary	Rs:	Ending Salary	Rs:
Responsibilities:				
From:	To:	Reason for Leaving:		
May we contact your previous supervisor for a reference?: YES <input type="checkbox"/> NO <input type="checkbox"/>				
DISCLAIMER AND SIGNATURE				
<p>I certify that the particulars furnished above are true and complete to the best of my knowledge. If this application leads to employment of me as a Civil Aviation Assistant in the Civil Aviation Authority of Sri Lanka, I understand that false or misleading information in my application or interview may result in my dismissal without prior notice and any compensation whatsoever, in addition to possible litigation process involving false declaration to a State Institution.</p>				
Signature			Date	

