APPLICATION FORM FOR THE POST OF

UNIVERSITY COLLEGE OF RATMALANA

| POS | T APPLIED: | | | | | | | | | | |
|----------|--|-------------|-------|--------|-----|----------|---|-----------------|-----------|---|-----------|
| NAM | 1E OF THE UNIVER | | GE: | | | | | | | | |
| | | | | | | | | | | | |
| 01 | Name in Full: | | | | | | | | | | |
| 02 | Name with Initia | ls: | | | | | | | | | |
| 03 | Permanent Addr | ess: | | | | | | | | | |
| | | | | | | | | | | | |
| 04 | Tel: | | | | | Nobile: | | | | | |
| | Fax: | | | | E | Email: | | | | | |
| 05 | National Identity | Card No: | | | | | | | | | |
| | | | | | | | | | | | |
| 06 | D ate of Birth: Ye | | | onth: | | Day: | | | | | |
| 07 | Age as at closing date of Applications: Years: Months: Days: | | | | | | | | | | |
| 08 | Civil Status: | | | | | | | | | | |
| 09 | Citizenship: | da | | | | | | | | | |
| 10 | Details of Secondary Education | | | | | | | | | | |
| | (I) G.C.E (O/ | | Vo | or | Sub | viact | | results | Subject | | Poculto |
| | Name of School/ | College | Yea | ar | Sub | oject | | results | Subject | | Results |
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| | (ii) G.C.E. (A | /L) | | | | | | | | | |
| | Name of School/ | | Yea | ar | Sub | ject | | results | Subject | | Results |
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| | | | | | | | | | | | |
| 11 | First Degree and | l Postgradu | ate D | Degree | (s) | | | | | | |
| | University/ | Degree | s | Class | 5 | Special | | Main | From – To | E | ffective |
| | Institution | | | | | or | S | ubject/Subjects | | | te of the |
| | | | | | | General | | | | | Degree |
| <u> </u> | | | | | - | Degree | | | | | |
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| 12 | Professional C | Qualification | | | | | | | | |
|-----|-----------------|--------------------|-----------------|---|----------------------------------|-----|------|---------------|--|--|
| | Institution | Exar | nination passed | | Specialization | n | Yea | ar of Passing | | |
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| | | | | | | | | | | |
| 13 | Certificates (| (if any) | | | | | | | | |
| 15 | Course/Certif | | | | Name of the | | Year | | | |
| | course/certin | icate rielu | | | institution/Universit | tv. | rear | | | |
| | | | | | matteriony oniversit | L Y | - | | | |
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| | | | | | | | | | | |
| 14 | Any other Aca | demic Distincti | ons | | | | | | | |
| | Scholarships, | Medals, Prizes, | etc. | | | | | | | |
| | (indicate the i | nstitution form | which such | | | | | | | |
| | awards have l | been obtained) | | | | | | | | |
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| 4 - | | | /·r | | | | | | | |
| 15 | | ublications, if ar | | | | | | | | |
| | | , please use sep | arate sneet | | | | | | | |
| | of same size) | | | | | | | | | |
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| 16 | Current Empl | oyment Record | | | <u> </u> | | | | | |
| 10 | Post | Designation | Institution | R | Brief Description of Time Period | | | | | |
| | . 050 | Sesignation | monution | | Duties | Fro | | То | | |
| | | | | | | | | | | |
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| 17 | Previous | working Ex | perienc | e (sta | arting with | present posi | tion and co | ntin | ue in | reverse | orde | r) | | | |
|----|------------------|---------------|----------|-------------|---------------|----------------------------|-------------|------|-------------------|---------|------|-------|--|--|--|
| | Post | Design | | | stitution | Brief Description of | | | Time Period | | | | | | |
| | | | | | | Duties | | | From | | То | | | | |
| | | | | | | | | | | | | | | | |
| 18 | Proficienc | y in Langi | uages (F | Pleas | e Mark '√' ii | n the relevant cage) | | | | | | | | | |
| | Written | | | | Satisfactory | Spoken Week Very good (| | | Good Satisfactory | | | Week | | | |
| | 3 3 7 3 | | Good | | Satistactory | vveek | Very good | 900 | Ju - | Satista | ισιγ | VVEEK | | | |
| | Sinhala Tamil | | | | | | | | | | | | | | |
| | English | | | | | | | | | | | | | | |
| | Other | | | | | | | | | | | | | | |
| 19 | | g & Informa | tion Te | chno | logy | | | | | | | | | | |
| 10 | - | | | | | | l | | Vee | | | | | | |
| | Qualificati | on | | Institution | | Skills gained | | | Year | | | | | | |
| | | | | | | | | | | | | | | | |
| 20 | Leadership | o/managem | | | | | | | | | | | | | |
| 21 | Extra Curr | icular activi | | | | | | | | | | | | | |
| 22 | Special Ski | ills | | | | | | | | | | | | | |
| 23 | Creativity | (including p | | | | | | | | | | | | | |
| 24 | Are you ur | nder any ob | ligatory | / Nat | ional Servic | e (If yes, spe | ecify): | | | | | | | | |
| 25 | If selected | , what is th | e earlie | st da | te that you | can assume | duties: | | | | | | | | |

| | Names of two persons (with addresses) to whom | reference can be made |
|-------------|---|---|
| | Name | Address |
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| 27 | | me in the application are true and accurate. I am |
| | | found to be false or incorrect, I am liable to |
| | | before the selection and dismissal without any |
| | compensation if the inaccuracy is discovered after | er the appointment. |
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| | | |
| 20 | Signature of Applicant | Date |
| 28 | For Public Sector Candidates | |
| | Application for the part of | submitted by |
| | is forwarded herewith. If he /she is sele | |
| | released. | cied for the salu post heysne can/carinot be |
| | Teleaseu. | |
| 1 | | |
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| | | Signature of the Head |
| | Date: | Signature of the Head |
| | Date: (Please place official seal of the Head of Institution | Signature of the Head of the Institution |
| | (Please place official seal of the Head of Institution | Signature of the Head of the Institution |
| (a) | (Please place official seal of the Head of Institution Note | Signature of the Head of the Institution on) |
| (a) (ii) | (Please place official seal of the Head of Institution Note If the Sheets above are not sufficient, please use | Signature of the Head of the Institution on) extra sheets, wherever necessary. |
| (a) (ii) | (Please place official seal of the Head of Institution Note If the Sheets above are not sufficient, please use Mention the list of documents attached along without the second seco | Signature of the Head of the Institution on) extra sheets, wherever necessary. |
| | (Please place official seal of the Head of Institution Note If the Sheets above are not sufficient, please use Mention the list of documents attached along with (a) | Signature of the Head of the Institution on) extra sheets, wherever necessary. |
| | (Please place official seal of the Head of Institution Note If the Sheets above are not sufficient, please use Mention the list of documents attached along with (a) (b) | Signature of the Head of the Institution on) extra sheets, wherever necessary. |
| | (Please place official seal of the Head of Institution Note If the Sheets above are not sufficient, please use Mention the list of documents attached along with (a) (b) (c) | Signature of the Head of the Institution on) extra sheets, wherever necessary. |
| | (Please place official seal of the Head of Institution Note If the Sheets above are not sufficient, please use Mention the list of documents attached along with (a) (b) | Signature of the Head of the Institution on) extra sheets, wherever necessary. |