

Application No.

Call Up No.

Office Use Only

Qualified	<input type="checkbox"/>	<input type="text"/>
Unqualified/ Doubtful	<input type="checkbox"/>	<input type="text"/>

**AIRPORT & AVIATION SERVICES (SRI LANKA) (PRIVATE) LIMITED
BANDARANAIKE INTERNATIONAL AIRPORT, KATUNAYAKE**

APPLICATION FOR THE POST OF HEAD OF AIRPORT MANAGEMENT

1 Title : Mr Mrs Miss

Last Name:

Initials with Last Name

Full Name as in NIC (In Block Letters) :

Other Names :

2 NIC No: Date of Issue:
Date Month Year

Date Of Birth : Age as at 24/07/2024:
Date Month Year year Month

Gender: Male Female Nationality:

Marital Status : Single Married Divorced Widow

3 **Contact Details**

Permanent Address :

City/Town: Postal Code :

Telephone Numbers Home: Mobile No:

Office : E-Mail:

District : Province :

(Important -. Further correspondent will be made to you via your Email address. Therefore, your Email address should be mentioned correctly and legibly)

11	Special Achievements
-----------	-----------------------------

.....

.....

.....

.....

.....

Employment History

(a) Present Post: (Copy of Service certificate or Appointment Letter should be attached)

12	Post	Institution	Period		Describe the work done
			From (dd/mm/yyyy)	To (dd/mm/yyyy)	

(b) Previous Employment

(Copies of Service certificates or Appointment Letters should be attached)

Post	Institution	Period		Total Service
		From (dd/mm/yyyy)	To (dd/mm/yyyy)	

13	Working Experience
-----------	---------------------------

Please explain the key responsibilities handled under each position mentioned above in part (b) in brief

.....

.....

.....

.....

.....

Extra Curricular Activities:

14	Category	Type	Achievement	Date/Year

Details of two non related referees:

15	No.	Name & Position	Official Address & Tele. Nos.	Residential Address & Tele. Nos.

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

Signature of the applicant:

Date: