THE OPEN UNIVERSITY OF SRI LANKA

FORM OF APPLICATION

POST: DI		IVI	SIOI	1:		CENTRE :
(Ind	icate the name of the post as giv	<i>r</i> en	in	the	advertisement)	
01.	(a) Name with initials	:				
	(b) Names denoted by	:				
	initials					
02.	Whether Rev/Mr/Mrs/Miss	:				
03.	(a) Postal Address	:				
	(Any change should be					
	communicated immediately)					
	(b) Tel. No	:	Re	s.	Off.	
	Fax No	:				
	E-mail	:				
04.	(a) Date of Birth	:				
	(b) Age as at the closing	:				
	date of applications					
05.	Civil Status	:				
06.	Whether Citizen of Sri Lanka	:				
	(State whether by descent or by					
	registration) if by registration give reference					
	number & date of certificate of					
	citizenship					
07.	Education - School Attended	:			From	To
	(1)					
	(2)					
	(3)					
	(4)					
	(5)					

08. University Education: Copies should be attached

Degrees/Diploma	Class	University	Effective	Duration
			Date	
1.				
2.				
3.				
4.				
5.				

09. Professional Qualifications:

Institution	Qualifications obtained	Effective Date	Duration
1.			
2.			
3.			
4.			
5.			

10. Postgraduate Qualifications:

Postgraduate	University	By Course	Effective	Duration
Degree/ Diploma		or	Date	(Prescribed
		By Research		period of
				Registration)
1.				
2.				
3.				
4.				
5.				

Contd... /3

11. Any other academic distinctions, scholarships, medals, prizes etc. (Indicate the Institution from which such awards have been obtained) :

:

:

:

- 12. Research & Publications if :
 any (If space is
 insufficient, please use
 separate sheet of same size)
- 13. State under which category :
 you are eligible to apply
- 14. Highest examination passed in Sinhala/Tamil

15. (a) Present occupation

- (b) Date of Appointment
- (c) Salary drawn
 (State whether basic or
 consolidated)
- (d) Name of Employer/ : Institution & Address
- (e) Previous appointments :if any with dates
- 16. Extra Curricular activities :

17.	Any further relevant :	
	particulars	
	(Not included above)	
18.	Name of two persons (with addresse	es to who reference can be made)
	Name	Address
	1	
	2	

I do hereby certify that 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.

Date :

Signature of Applicant

Recommendation by the Head of the institution:

I recommended the above application and agree to release the applicant in case he is selected for the post applied for

Signature of the Head of Institution

DECLARATION FORM

Every applicant should fill this form

1.	Post applied for at the Open University	:	
2.	Full Name	:	
3.	Address	:	
4.	Designation	:	
5.	Name of Employer	:	
6.	Address	:	
7.	Reasons for leaving previous service	:	

Name of Employer	Designation	Duration	Reasons for leaving whether terminated/ dismissed/ vacated/ retired/ resigned/ released on secondment
1.			
2.			
3.			
4.			
5.			

- 8. Have you entered in to a Bond/ Agreement with any of your previous employer/s for Training/Study Programme:
- Nature of i Training/ Study programme ii. Obligatory : Period iii. Date of : Commencement of obligatory period Date of expiry : iv. of obligatory period Monetary value : v. of the Bond

I declare that the above information is true to the best of my knowledge.

Date :

Signature of Applicant

Observations of the Head of the Institution.

- <u>N.B.</u> 1. Written answers should be provided in each section. Leave no section unanswered. If any section is not applicable please write word "inapplicable."
 - 2. If the space provided under each section is inadequate, you are free to use additional paper and place your signature and date on each such additional paper.
 - 3. Copies of Educational Certificates/ Training Programs/ Experience should be annexed with the application.