Limited Competitive Examination for Recruitment to the post of Assistant Director (Fisheries and Aquatic Resources/Technical) Grade III in the Departmental Executive Category of the Department of Fisheries and Aquatic Resources - 2024

	Number:								
For office use									
1.0	Name: 1.1	Name in full: (in English Block Capitals)							
		(Eg: HERATH MUDIYANSELAGE BUDDHIKA SAMPATH KUMARA GUNAWARDHANA)							
	1.2	Last name followed by the initials: (in English Block Capitals) (Eg: <u>GUNAWARDHANAH.M.B.S.K.</u>)							
	1.3	Name in full:							
2.0	2.1	Permanent Address							
		(in English Block Capitals)							
	2.2	Permanent Address							
		(in Sinhala/Tamil)							
	2.3	Official Address: (in English Block Capitals)							
	2.4	Official Address:							
	2.5	Address to which the Admission Card to be sent (in English Block Capitals):							
	2.6	National Identity Card No:							
	2.7	Sex : Male - 0 Female - 1 (Indicate the relevant number in the cage)							
	2.8	Telephone No. :							
	2.9	E-mail Address :							
3.0	3.1	Marital status : Married-1 Single-2 (Indicate the relevant number in the cage.)							

3.2	Date of Birth:					
	Year		Month		Date	
3.3	Age as at.2023					
	Years	Months		Days		

4.0 Educational and Professional Qualifications:

4.1. Basic Degree Qualifications

- 4.1.1. Degree:
- 4.1.2. Area of subject studied:

Degree/Others	Relevant subjects/field	Pass	Year	University/Instit ution

- 4.1.3.Principal subject of the Degree:
- 4.1.4. Year of graduation:
- 4.1.5. University:

4.2. Additional Educational Qualifications

- 4.3. G.C.E.(A/L) Qualifications: 4.3.1. Year

 - 4.3.2. Index Number

Subject	Pass

4.4. G.C.E.(O/L) Qualifications: 4.3.1. Year

4.3.2. Index Number

Subject	Pass

4.5. Computer Literacy

Subject	Duration	Institute	Year

4.6. Proficiency in English Language (Indicate the courses followed):

••••••	••••••	••••••

4.7. Professional qualifications:

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5.0. Service Experience

Post	Name of the Institution /Division	From	То

6.0. Payment of Examination Fees:

I. Receipt Number:	iii. Place of Payment
ii.Date:	iv. Amount paid in Rupees

Attach the original of the receipt for the payment of examination fee here from one edge (It would be useful to keep a photocopy of the receipt with you.)

Certificate of the Applicant

(To be signed in the presence of attestor)

I hereby declare that the above-mentioned particulars are true and correct to the best of my knowledge and that the receipt for the payment of examination fees bearing No.------ dated------ is attached hereto. I also agree with any decision taken to cancel my candidature before or during or after the examination if I am found to be ineligible as per the terms and rules applicable to the examination. I further declare that I am liable to abide by the rules and regulations laid down by the Commissioner General of Examinations regarding the conducting of the examination and the release of results.

Date:

Signature of the Applicant

7.0. Attestation to the signature of the applicant

I do hereby certify that Mr./Mrs./Miss, the applicant above named is personally known to me, that he/she placed his/her signature on/. ... in my presence and that he / she has pasted the receipt on the application having paid the prescribed examination fee.

Signature of the Head of the Division/District Assistant

Date: -Name: -Designation: -(Official Seal)

8.0. Certificate of the Head of the Department/Institution

(For certification by the immediate head of the applicant)

Signature of the Head of the Institution

Date: -Name: -Designation: -(Official Seal)