# NATIONAL WATER SUPPLY & DRANAGE BOARD HUMAN RESOURSCES MANAGEMENT SECTION

Years

Married

1. Name with Initials									(Mr./Mrs. /Miss)
Name in full									•
2. Postal Address									
WhatsApp Number									
Contact Number									
Email ID									
3. NIC Number									
		<u> </u>	<u> </u>						
4. Date of Birth	D	D	M	M	Υ	Υ	Υ	Υ	

Month

Days

unmarried

APPLICATION FOR THE POST OF ......

## 6. Whether Citizen of Sri Lanka

Age as at the Closing date

#### 7. Qualifications

5. Civil Status

#### a. Academic Qualification

Institution	Institution Qualification Date		Dura	tion
institution	Qualification	Effective	From date	to date

<ul> <li>b. Memberships of Professional Bodi</li> </ul>	lies
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Institution	Type of membership	Corporate / Non Corporate	Date of Effective

## 8) Work Experience

	Name of Institute /	Designation	Dura	Total	
Organization		Designation	From date	To date	Experience

### 9. Other Achievements:

Achievement	Year

## 10. Names of two non-related referees with addresses and Contact Nos.

Name	Address
1.	
2.	

11. Have yo	you been convicted of a criminal offence in a Court of Law? If so, g	ive details:
-	es of the following certificates (Not originals) should be attached: pplications not supported by copies of these certificates will be rejected.	ed
a) b) c) d) e) f)	Birth Certificates Certificates of Educational Qualifications Academic Transcript of Degree Certificates of Professional Qualifications Letters of Experience Copies of other achievement certificates	
am also awa to be disqua	by certify that the particulars furnished by me in this application ar aware that, any particulars contained herein are found to be false or qualified before selection or to be dismissed without any compensati er appointment.	incorrect, I am liable
	Signature of Ap	plicant
Date:		
Certificate	te of Head of Department/Institution	
(Only for the	he applicants serving in the Public Service/ Government Corporations/ Stat	utory Boards.)
General Ma	Manager - NWSDB,	
	ended and forward the application of Mr. / Mrs. / Miss	
and that he,	he this institution. I certify that his/ her work and co he/ she has not been subject to any disciplinary action. He/ She can b from service if selected for this post.	
Date:	Signature of Head of De (Official S	