Specimen Application

<u>Limited Competitive Examination for Recruitment to the Post of Departmental Assistant</u> <u>Director (District Land Use) Grade III of Executive Service Category of the Land Use</u> <u>Policy Planning Department -2024</u>

Medium at the exam	ination:					
Sinhala-2						
Tamil-3	(w	rite relevant num	ber in the ca	ge)		
English -4						
01. Name in Full (In						
1:2 Name with Initia)				•
1:3 Name with Initia	als (In English					
02. Address:						
2.1 Permanent Addr		n/Tamil)				
2.3 Telephone Nu	mbers :- Mobi	ile:	Fixe	d	 	
2.4 E-mail Address	3 :				 	
03. Gender:						
Male - 0 Female -1	(write	the relevant No. in	the cage)			
04. Civil Status: -						
Married – 1						
Unmarried -	- 2 (wr	ite the relevant No	o. in the cage	e)		
05. National Identit	y Card No.					
06. Date of Birth:						
Year :		Month :		Date :		
07. Age at the closin	ng date (As at	23/09/2024)				
Years ·		Months :		Dates :		

08. Date of First Appointment:	
8.1 Post :	
8.2 Grade :	
10. The District serving at present :	
11. Basic Degree obtained	
12. Details on receipt for payment of examinat i. Receipt number and date :	ion fees:
ii. Post office/Sub-post office:	
iii. Amount :	
	true to the best of my knowledge and belief. I am aware that I information is found to be false prior to my selection and
	ny compensation if it is discovered after the appointment. the rules and regulations imposed by the Commissioner
	conduct of examinations and the issuance of results.
Date :	Signature of the Candidate

13.	Attestation of the Signature of the Candidate :				
	I do hereby certify that the applicant, Mr/Mrs/Miss				
	Signature of Certifying Officer (Should keep the rubber stamp) Date:				
	Full name of the Certifying officer:				
14.	Recommendation of the Head of the Department:-				
	I certify that the information submitted by the officer Mr/Mrs/Msin this application is true and correct and that the due examination fee has been paid and the receipt has been affixed and I recommend and submit his/her application .				
	Date: Signature of the Head of the Department (Official frank should be placed).				