## Specimen Form of Application

## APPLICATION FOR RECRUITMENT FOR THE VACANCIES IN THE POST OF VETERINARY SURGEON GRADE III OF THE SRI LANKA ANIMAL PRODUCTION AND HEALTH SERVICE

												(for o	ffice us	se only)	
01.	I. Name with initials -														
	In Sinhala :			••••			•••••		••••						
	In English (In Block Let	tters)													
	II. Names denoted by the	initials	(In E	nglis	h bloc	k lett	ers)								
02.	National Identity Card No.	o. 🗌												]	
02	Destal Address														
03.	03. Postal Address :														
	(Any Change in the address should be informed without delay)														
04.	I. Provincial Council	:													
	II. District	:													
	of the permanent residence	e													
05.	Telephone No. : Fixed														
	Mobile														
06.	Date of Birth : Year	M	onth .		Da	te									
	Age as at the closing date	of appl	icatio	ns · '	Vears		N	[onth	2 •		Day	7 <b>S</b> •			
	rige as at the closing date	or uppi	licatio	113 .	rears		14	Iontin			Day				
07.	a) Whether you are a Sri I	Lankan	:	•••••											
	b) Ethnicity (Sinhala/ Sri	Lankan	Tami	il/ Inc	dian T	ˈamil/	Musl	im/ O	ther)						
08.	a) Gender :														
	b) Whether married/ sing	le or w	idowe	ed:											

09. Educational Qualifications :

Degree/ Post Graduate Degree obtained	Class	University	Date of completion of the degree
1.			
2.			
3.			

- 10. Number and date of registration at the Sri Lanka Veterinary Council : .....
- 11. Particulars of service : (if holding a permanent post at present)

Present Post	Period	of Service	Service station ;	Department/ Provincial		
	from	to		Council		
1.						
2.						
3.						

12. I do hereby certify that the particulars furnished by me in this application are true and accurate. I am aware that I will be disqualified if any particulars indicated here are detected false or incorrect before the selection and I will be subject to dismissal from the service without any compensation if detected after the appointment. I also certify signing below that I have not been convicted of any criminal offence by any court of law.

...., Signature of the Applicant.

Date : .....

(Applicable only to the applicants holding a permanent post in the Government)

## 1. Certificate of the Head of the Department/ Establishment

I certify that the above applicant Mr./ Mrs./ Miss. ..... is an officer of this Department/ Provincial Council holding a post of ..... and that the particulars mentioned in the application are correct according to his/her personal file. I also inform that he/she can/cannot be released from this Department/ from the Provincial Public Service if this officer is selected to this post.

Head of the Department/ Establishment, (Official Stamp).

Date : .....

Address : .....

10-200