Ministry of Finance, Planning and Economic Development Welfare Benefits Board

	Application for the	Post of	•••••		
1.0	Personal Information :				
	1.1 Name with Initials (In English block capitals):				
	1.2 Name in full (In English block ca 1.3 Permanent Address (In English b 1.4 Temporary Address (In English b For 1.5 & 1.6, put the "√" mark in a 1.5 Gender: Male 1.6 Civil Status: Married 1.7 National Identity Card No:	Female Unmarried Ionth Year			
	1.10 Telephone No : Home				
	Mobile				
	1.11 Email Address :				
2.0	Graduation Information :				
	2.1 Basic Degree :				
	2.2 University/ Institute :				
	2.3 Effective Date:				
	2.4 Do You have a class: Yes No				
	If Yes, Please Specify:				
2.5	Post Graduate Information (If relevan	nt)			
	No. Degree Name	University / Institute	Year		
	1.				

2.

3	O	Profe	200101	nal F	ducation	

No.	Course/ Diploma Name	Institute	Time Period
1.	Computer Course		
2.			

4.0 Job Experiences:

No.	Post / Designation	Institute	Period		No. of
			From	То	Years
1.					
2.					

5.0	Other Qualifications :		
6.0	Declaration of the Applicant :		
	I respectfully declare that the particulars furnished by me in this application are true and correct to the best of my knowledge.		
	Date Applicant's Signature		
7.0	(This part is applicable only for candidates who engage in government employment) Attestation of the head of the Department/ Institution:		
	I hereby certify that Mr./Mrs./Miss		
	who is working in this institution, is working in the post of		
	and his/her work and conduct are satisfactory, no disciplinary action pending		
	against him/her and no decision has been taken to impose any such in the future. If he/she will be selected		
	for this post, he/she can/cannot be released from the service.		
	Date		
	Signature of the Head of the		
	Department or Authorized Officer.		
	Name:-		
	Designation:-		
	Institute :-		