

**OFFICE ON MISSING PERSONS
APPLICATION FORM**

Position/ Post :

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1.0 PERSONAL DETAILS:

1.1 Name with initials at the end (In English block capitals):-.....

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1.2 Name in full (In English block capitals):-.....

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1.3 Name in full (Sinhala / Tamil) :-.....

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1.4 Permanent Address (Sinhala / Tamil):-.....

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1.5 Permanent Address (In English block capitals):-.....

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1.6 Gender :-.....

1.7 Marital status :-.....

1.8 Nationality :-.....

1.9 National Identity Card No:-

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1.10 Date of Birth :- Date

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Month

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Year

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1.11 Telephone No:-

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1.12 Email Address :-.....

1.13 District :-.....

2.0 EDUCATIONAL QUALIFICATIONS:

(Bachelor Degree)

2.1 Ordinary Level (O/L) Examination : Year :-.....Index No :-.....

Subject	Grade	Subject	Grade

2.2 Advanced Level (A/L) Examination : Year :-.....Index No :-.....

Subject	Grade

2.3 (i) Date of Graduation :-.....

(ii) University / Institution :-.....

(iii) Internal / External :-.....

(iv) Degree :-.....

(v) Subjects :-.....

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(vi) Class :-.....

Upper / Lower :

(vii) Effective Date :-.....

(viii) Language Medium of Examination :-.....

(Master Degree)

- 2.2 (i) Date of Graduation :-.....
- (ii) University / Institution :-.....
- (iii) Degree :-.....
- (iv) Subjects :-.....
.....
- (v) Class :-.....
- (vi) Effective Date :-.....
- (vii) Medium of Examination :-.....

3.0 PROFESSIONAL QUALIFICATION:

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4.0 OTHER QUALIFICATIONS:

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5.0 WORKING EXPERIENCE:

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6.0 NON – RELATED REFEREES

Name and Telephone No	Position	Address

7.0 Declaration of the Applicant:

(a) I respectfully declare that the particulars furnish by me in this application are true and correct to the best of my knowledge. I agree to bear the loss which may occur due to incomplete and / or incorrect completion of any part of this application. Further, I state that, all contents of this application are true and correct to the best of my knowledge.

(b) I shall not subsequently change any information stated above.

.....
Date

.....
Applicant's Signature

8.0 (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 on Permanent basis/ Contract basis/ Casual/ Temporary basis in this ministry/department/institution, in the post of Since..... 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 release from the service.

Signature of the Head of the Department :

Name :

Designation :

Ministry/ Department :

Date :