



UNIVERSITY OF JAFFNA, SRI LANKA

	FOR	M OF APPL	ICATION			
POST : DEPARTMENT / DISC (Indicate the name of the		nent/Discipline a	s given in the adve	rtisement)		
1. Name in Full :						
*(See note below)						
2. Whether Rev./ Pro	of./ Dr./ Mr./ Mrs.	/ Miss.				
3. (a) Postal address (Any changes should be	: e communicated immediat	ely)				
(b) Contact Telepho	one No :					
Fax :						
e-mail address	:					
4. (a) Date of Birth:						
(b)Age at the closi	ng date of Applica	ition:				
5. National Identity (Card No:					
6. Civil Status :			Single / Married			
7. Gender :			Male/ Female			
8. State whether citiz						
State whether by Descent or Registration)						
If by registration, give reference No & date of						
certificate of citize	•					
9. Education -School	s attached:					
		F	rom		То	
1.						
2.						
3.						
10. Qualifications	5 -					
•	to be considered	should be ind	licated in the a	oplication)	
(<u>Copies</u> of Educati			-	•	•	tached
herewith) 10.(a) University Educ	ation					
University Luce						1
and	Degree/	**Subject/s	Duration	Class	GPA	Effective
Registration No.	Diploma etc.	offered	with dates		_	date
1.						
2.			1			

* If you were registered as a student in University under any other name please indicate such name within brackets.

****** If the degree is a special degree, please indicate only the subject in which specialized.

Academic Establishments, University of Jaffna

10.(b) Postgraduate Education						
Postgraduate Degree/ Diploma etc. and University & Registration No.	Field of Study	Whether Full time or Part time	Whether by Course work / Course with Research component / By Research	Class/ Grade/ GPA	Durations with dates and No. of Academic years	Effective date
1.						
2.						
3.						
10.(c) Professional /Sp	pecial Qualifications					
Institution	Qualifications obtained	Dura	Duration with dates Effective date			ite
1.						
2.						
3.						
11. Any other Academic Distinctions, Scholarships, Medals, Prizes etc. (Indicate the Institution from which such awards have been obtained)						
1.						
2.						
3.						
12. Research & Publications if any: The name of the Journal in which the Publications has been made and the date of the Journal should be mentioned. (If space is insufficient, Please use separate sheet of same size)						
13. Higher Examination passed in Tamil / Sinhala.						

14. (The service certificates should be attached in order to prove the service experience. The appointment letters will not be considered for service experience.)					
a) Present Occupation	sidered for service	experience.j			
i. Designation	:				
ii. Date of Appointment to such	i post :				
iii. Place of work with address	:				
iv. Whether confirmed in the po	ost :				
v. Nature of Appointment: Perr	nanent / Contract	/ Temporary /	Casual /		
vi. Salary scale :					
a. Basic Salary :					
b. Allowance :					
(b) Previous appointments if any, v (If space is insufficient, Please use		f same size)			
Post	Department/		From	То	
1.					
2.					
3.					
(c) If you are retired from Governn give date of retirement, the last					
and the pension.					
(d)If your services in a Government Department					
or a Corporation were terminated, give reasons.					
15. Extra Curricular activities.		<i>c</i>			
(If space is insufficient, Please us	se separate sheet	of same size)			
16. Any further relevant particulars.					
(Not included above)					

17. Name of two non related referees with address & contact no.				
<u>Name</u>	Postal & E-mail Address and Contact No			
1				
2				

I hereby certify that the particulars submitted by me in this application are true and accurate. I am aware if any of the particulars are found to be false or inaccurate, I am liable to be disqualified before selection and to be dismissed without any compensation if the inaccuracy is detected after appointment.

Date	:		
------	---	--	--

Signature of applicant

18. If the applicant is an employee in a Government / Corporation or Statuary Board this section should be filled by such Head of the Department / Institution.				
The applicant will / will not be released, if selected for appointment.				
	Head of Institution			
	(Official Rubber Stamp)			
Name :				
Designation :				
Date :				

If the application form downloaded from the University website, the paid Bank Slip for the deposit of a sum of Rs.100/- credited to the Peoples Bank Account No: **162-1-001-6-0000880** of Bursar, University of Jaffna should be attached here.