				Applica	tion No.		
				Cal	l Up No.		
A		EE(O/L)	English	Mathematics		GCE(A/L)
C	Diploma in Market	ing C	Copies	Qualified		Not	
F	Reason						
	AIRPORT & AVIATION SERVICES (SRI LANKA) (PRIVATE) LIMITED BANDARANAIKE INTERNATIONAL AIRPORT, KATUNAYAKE APPLICATION FOR THE POST OF TRAINEE MARKETING COORDINATOR						
1 T	itle : M	r Mrs	Miss]			
L	ast Name:						
	nitials with Last Name						
N	Full Name as in : NIC (In Block etters)	:					
C	Other Names :						
2 N	NIC No:			Date of Issue:	Date	Month	Year
D	Date Of Birth:	ate Month	Year	Age as at 25/03/		ear	Month
G	Gender: Ma	le Female	Nati	ionality:			
M	Marital Status	: Single	Married	Divorced	Widow		
	Contact Details Permanent Address						
'	ermanent Address						
C	City/Town:			Postal Code :			
	elephone Numbers Home:			Mobile No:			
C	Office :		e-Mail:				
С	District :			Province :			

4	Highest Educa	tion Qualificat	tion	:					
	ACADEMIC (QUALIFICATION	ONS						
		.) (Copies of c		tes sh	ould be att	tach	ed)		
5	S	ubject	G	irade		Ind	ex No		Year
	Mathematics								
	English								
	G C E (A/L	.) (Copies of c	certificat	es sh	ould be att	tach	e d)		
6	Index No	:				,	Year :		
		Subject		Gra	ade	•	Subject		Grade
	LINIT/FDCITY	V FRUGATION							
		Y EDUCATION							
	(Degrees, D	iplomas etc.)	(Copies (of cer	tificates sh	noul	d be attached	<i>D</i>	
7	Name of the	University/			iod		Field of	Results	Effective
	Degree/ Diploma	Institution	From		To (dd/mm/yy	///)	Degree	(indicate Class or	Date
	Біріотіа		(dd/IIIII)	, , , , , ,	(dd/iiiii/yy	, , , ,		Grade)	

POSTGRADUATE QUALIFICATIONS (Postgraduate Diplomas, Master Degrees, Ph.D. etc.) (Copies of certificates should be attached)

8	Name of the Degree/	University/	Period		Subject	Effective
	Postgraduate Diploma	Institution	From	То	Area/s	Date
			(dd/mm/yyyy)	(dd/mm/yyyy)		

PROFESSIONAL QUALIFICATIONS (Examination/Memberships of Professional Bodies (Associate/Corporate Membership etc.) (Copies of certificates should be attached)

9	Institution	Name of the Examination/Membership	Membership Category	Effective Date

Training Programmes/Workshops/Seminars/Conferences participated: (Copies of certificates should be attached)

10	Name of the Training Programme/Work shops ets.	Institution	Period

LANGUAGE PROFICIENCY:

(Please use words like Poor, Satisfactory, Good, Excellent to fill the table)

11	Language	Understanding	Speaking	Writing
	English			
	Sinhala			
	Tamil			

Employment History

(a)	Present	Post:
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12	Post	Institution	Period	
			From (dd/mm/yyyy)	To (dd/mm/yyyy)

(b) Previous Employment

Post	Institution	Per	Period	
		From (dd/mm/yyyy)	To (dd/mm/yyyy)	

Extra-Curricular Activities:

13	Category	Туре	Achievement	Date/Year

Details of two non related referees:

14	No.	Name & Position	Official Address & Tele. Nos.	Residential Address & Tele. Nos.

I hereby certify that the particulars submitted by me in this application are true and accurate. I am aware that if any of these 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.

Signature of the Applicant:	Date:
Signature of the Applicant	Date