



UNIVERSITY OF VAVUNIYA, SRI LANKA
FORM OF APPLICATION
Non-Academic Positions (External)

Post applying for:			
1. (a) Name with initials : (Whether Mr/Mrs/Miss) (b) Name in full :			
2. (a)Postal Address: (Any changes should be communicated immediately)		(b)Contact Details: (i) Home No: (ii) Mobile No: (iii) E-mail address:	
3. (a) Date of Birth : Date:..... Month:..... Year:.....		(b) Age at the closing date of Application: Years:..... Months:..... Days:.....	
4. (a) Civil Status : (Single / Married / Divorced)		(b) Identity Card No:	
5. Educational Qualifications (attach copies of certificates)			
(a) <u>G.C.E(Ordinary Level)</u>			
1 st Sitting Year :		2 nd Sitting Year :	
<u>Subject</u> <u>Grading</u>		<u>Subject</u> <u>Grading</u>	
1. ....	.....	1. ....	.....
2. ....	.....	2. ....	.....
3. ....	.....	3. ....	.....
4. ....	.....	4. ....	.....
5. ....	.....	5. ....	.....
6. ....	.....	6. ....	.....
7. ....	.....	7. ....	.....
8. ....	.....	8. ....	.....
9. ....	.....	9. ....	.....
10. ....	.....	10. ....	.....
(b) <u>G.C.E(Advanced Level)</u>			
1 st Sitting Year :		2 nd Sitting Year :	
<u>Subject</u> <u>Grading</u>		<u>Subject</u> <u>Grading</u>	
1. ....	.....	1. ....	.....
2. ....	.....	2. ....	.....
3. ....	.....	3. ....	.....
4. ....	.....	4. ....	.....

(C) Higher Education (Degree, Diploma and etc.)

6. Professional & Other Qualifications, if any :
(Attach copies of the relevant documents)

7. Extra-Curricular activities if any :

8. Employment details:

(a) Present occupation:

(b) Employment Records:

Starting with your recent post, give in reverse order, details of your employment record. Salary Particulars should be recent one or that at the time of leaving, the post(annex a separate sheet if necessary)

POST	ORGANIZATION	PERIOD From - To	SALARY POINT & SALARY SCALE	DESCRIPTION OF DUTIES

9. Any other relevant particulars:

10. If your services in a Government Department or a Corporation were terminated, give details and the reasons:

11. Names and addresses of two persons from whom reference can be made:

(i) Name :

(i) Name :

(ii) Address:

(ii) Address:.....

.....

.....

I do hereby certify that the particulars given by me in this application are true and accurate, I am aware that if any particulars are found to be false or inaccurate prior to my selection, my application will be rejected, and that if any particulars are found to be false or inaccurate after my selection, I will be dismissed from the service without any compensation.

Date:.....

.....

Signature of the Applicant

This section is relevant to those who are in service.

This application is recommended & forwarded

Date :.....

.....

Signature of the Head of Department
(Official Rubber Stamp)