



Civil Aviation Authority of Sri Lanka

No.04, Hunupitiya Road,
Colombo 02.

Application for Employment

E-mail: employment@caa.lk

Fax: +94-112304697

Website: www.caa.lk

<p>INSTRUCTIONS: Please answer each question clearly and completely. Completed application forms shall reach the Director-General of Civil Aviation & Chief Executive Officer, the Civil Aviation Authority of Sri Lanka on or before the deadline given in the advertisement. If a particular question is not applicable please indicate "Not applicable" in the relevant cage.</p>										<p>IMPORTANT Please Attach Recent Colour Photograph Here</p>
1. Particulars of the Post applying for										
1.1 Title					1.2 Code					
2. Surname (and maiden name, if applicable)			3. First Name				4. Middle name			
5. Name with initials										
6. Permanent address					7. Residential Address					
8. Grama Seva Division of Residence			9. Electorate of Residence			10. District of Residence				
11. Land Phone No.		12. Mobile Phone No.		13. Emergency Contact No.			14. e-mail address			
15. Date of Birth		16. Place of Birth			17. Country of Birth			18. Current Citizenship		
19. National Identity Card					20. Current Passport					
20.1 Number		20.2 Date of Issue			21.1 Number		21.2 Date of Issue		21.3 Place of Issue	
21. Sex		22. Marital Status			23. Height (cm)			24. Weight (kg)		
25. Language Skills		Sinhala			Tamil			English		
		Read	Write	Speak	Read	Write	Speak	Read	Write	Speak
Fair		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Very Good		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
other		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Education Qualifications		A. University or tertiary educational qualifications								
Name and Place		Year attended		Qualification obtained				Nature of specialization		
		From	To							

Name and Place	B. Secondary level schools			
	Year attended		Highest Examinations Passed	Subjects and Results achieved
	From	To		
27. Professional Qualifications				
Name and Place	Year attended		Qualification obtained	Nature of specialization
	From	To		
27. Description of membership of professional societies, and activities undertaken in field of civic, public or international affairs				
28. List any significant publications you have written (do not attach)				
29. List any special skills you possess and office machines and equipment you can use. In particular any computer equipment and software				

30. EMPLOYMENT RECORD: Starting with your present position, list in reverse order all positions, paying special attention to any significant experience, which will be helpful in evaluating your record. Use a separate block for each position. Use additional sheets of paper as required. Include service in the armed forces and any period of unemployment

Present or most recent position				Description of your work
Dates		Salaries per annum		
From	To	Starting	Most recent	
Exact title of your position				
Name of employer		Type of business		
Address of employer		Name of supervisor		
Number and kind of employees supervised by you				
Reason for leaving, if applicable				
Position held				Description of your work
Dates		Salaries per annum		
From	To	Starting	Most recent	
Exact title of your position				
Name of employer		Type of business		

Address of employer		Name of supervisor		
Number and kind of employees supervised by you				
Reason for leaving, if applicable				
Position held				Description of your work
Dates		Salaries per annum		
From	To	Starting	Most recent	
Exact title of your position				
Name of employer		Type of business		
Address of employer		Name of supervisor		
Number and kind of employees supervised by you				
Reason for leaving, if applicable				
Position held				Description of your work
Dates		Salaries per annum		
From	To	Starting	Most recent	
Exact title of your position				

Name of employer	Type of business	
Address of employer	Name of supervisor	
Number and kind of employees supervised by you		
Reason for leaving, if applicable		
31. Have you ever been convicted? If so please give details		
32. Have your applied to any post of the CAA previously? If so please mention the post and the date/year		
33. References: List three persons not related to you who are familiar with your character and qualifications. Do not repeat names of supervisors listed under Item 30		
Full Name	Full address (also telephone or fax number or e-mail address, if known)	Occupation

I certify that the particulars given above in the application are true and correct to the best of my knowledge.

.....
Date

.....
Signature of the applicant

NOTE: a. Applications not conforming to the above format will be rejected. Late applications will also be rejected.
 b. If the space provided above is not sufficient to provide details about any matter asked for above, you may use additional sheets to provide such information by stating relevant the number and the topic.
 c. You may be requested, in the course of the selection procedure, to supply documentary evidence in support of the statements you have made above. Please do not, however, send any documentary evidence until you have been asked to do so.

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