

(For office use only)

1.0 Medium : Language medium of examination

Sinhala 2

English 3

Tamil 4

(Indicate the relevant number in the cage)

(The application should be filled in the same language in which the candidate intends to sit the examination)

2.0 Indicate the posts applied for on the order of merit and preference (Clearly indicate the codes mentioned in the Gazette Notification) :

No.	Designation	Code Number
01.		
02.		
03.		
04.		

3.0 Personal Information :

3.1 Name in Full (In Sinhala/Tamil) : \_\_\_\_\_.

(Eg. : HERATH MUDIYANSELAGE SAMAN KUMARA GUNAWARDHANA)

3.2 Name with initials at the end (In English Block Capitals) : \_\_\_\_\_.

(Eg. : GUNAWARDHANA, H. M. S. K.)

3.3 Name in Full (In Sinhala/Tamil) : \_\_\_\_\_.

3.4 Permanent address in English Block Capitals : \_\_\_\_\_.

(Admission cards shall be posted to this address)

3.5 Postal city : \_\_\_\_\_.

3.6 Permanent address (In Sinhala/Tamil) : \_\_\_\_\_.

3.7 National Identity Card No. :

3.8 Sex : Male - 0

Female - 1

(Indicate the relevant number in the cage)

3.9 Date of Birth :

Year

Month

Date

3.10 Age as at the closing date of applications :

Years

Months

Days

3.11 Ethnic group : Sinhala - 1, Tamil - 2, I. Tamil - 3, Muslim - 4, Other - 5   
(Indicate the relevant number in the cage)

3.12 Marital Status : Married - 1 Unmarried - 2  (Indicate the relevant number in the cage)

3.13 Telephone No. : Mobile 


  
Residence 


3.14 E-mail address : \_\_\_\_\_.

4.0 Qualifications :

4.1 Effective date of the degree : \_\_\_\_\_.  
(Please refer Section 4 of the notification to verify whether you possess this qualification)

Examination/Degree	Class	Year	Subjects	University/Institution

5.0 Affix the receipt properly :

*It is advisable to keep a photocopy of the receipt.*

Receipt No. : \_\_\_\_\_.  
Post office to which the payment has been made : \_\_\_\_\_.  
Date : \_\_\_\_\_.

6.0 If you have ever been convicted of a criminal offense by a court, indicate the particulars of the offense and the punishment received : \_\_\_\_\_.

7.0 Certification of the Applicant :

I solemnly declare that particulars furnished by me in this application are true to the best of my knowledge and belief and the receipt No. .... dated ..... being the payment of the examination fee is affixed herewith. I also agree to be bound by the rules governing examinations and any decision that may be taken to cancel my candidature prior or during or after the examination if it is found that I am ineligible according to the conditions of this examination. Further, I shall be liable to be dismissed from service without any compensation, if it is found that any particular indicated in the application is found to be false or incorrect even after the appointment to this post and I agree to be bound by the rules and regulations imposed by Commissioner General of Examinations on conducting the examination and the decisions on issuing the results.

Date : \_\_\_\_\_, \_\_\_\_\_,  
Signature of the applicant.

8.0 Attestation of the applicant's signature (As per 9.x of the Gazette Notification) :

I hereby certify that ..... (Full name) who submits this application is known to me personally, that he/she has paid the prescribed examination fee and affixed the relevant receipt herein. He/she placed his/her signature in my presence on .....

\_\_\_\_\_,  
Signature of the Officer attesting the Signature.

Date : \_\_\_\_\_.  
Full name of the officer attesting the signature : \_\_\_\_\_.  
Designation : \_\_\_\_\_.  
Address : \_\_\_\_\_.  
(To be certified by placing the Official Stamp)

9.0 Attestation of the Head of the Institution :

(Only for applicants who are in Public Service/Provincial Public Service/State Corporations) :

Mr./Mrs./Miss ..... who submits this application, is serving as a ..... at this Ministry/Department/Institution and his/her application is recommended and submitted herewith. Necessary arrangements can be made to release him/her from the service of this institution, if selected for this post.

\_\_\_\_\_,  
Signature of the Head of the Institution.

Name : \_\_\_\_\_.  
Designation : \_\_\_\_\_.  
Date : \_\_\_\_\_.  
(Official Stamp)



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