

			<u>SRILANK</u>	AN AIRLINES			
Full Name							
Surname				Preferred Nam	ne		
Date of Birth	Year		Month		Date		
NIC No			Citizenship		Sex	М	F
Marital Status (✔)	Single	Marrie	d	Divorced	Separa	ated	Widowed
Address					·		
Telephone No/s				E-mail Ad	ddress		
Height in cms				Weight in	Weight in Kgs		
Name of School / Coll		NS					
C C E O /I	Year						
G.C.E O/L	Subject			Subject			
Subjec	ct	Gradin					
Subject 1.			6.				
Subject 1. 2.	<u> </u>		7.				
1. 2. 3.	ct .		7. 8.				
Subject 1. 2.	ct		7.				
1. 2. 3. 4.	ct		7. 8. 9.				
1. 2. 3. 4.	Year		7. 8. 9.				
Subject 1. 2. 3. 4. 5. G C E A/L 1.			7. 8. 9. 10.				
Subject 1. 2. 3. 4. 5.			7. 8. 9. 10.				

EMPLOYME	NT REC	CORD)									
From Date To Dat		o Date	te Name of the Company			Position		Duties/Responsibilities				
HAVE YOU BEEN EMPLOYED BY SRILANKAN AIRLINES PREVIOUSLY? Yes/No												
If yes, plea	se give	part	iculars									
From Date To Date		te	Position		St	aff No	Department					
Reason for leaving												
THOSE WHO LEFT SRILANKAN AIRLINES THROUGH VSS / VRS OR TERMINATION WILL NOT BE ELIGIBLE TO APPLY.												
Have you been interviewed by SriLankan Airlines previously for Cabin Crew?												
If Yes, When?												
Have you completed the IATA Cabin Crew course conducted by the International Aviation Academy of SriLankan Airlines? Yes/No												
If yes the p	eriod	••••										
I declare that the above information furnished by me is true and correct to the best of my knowledge.												
Signature: Date:												