

Airport & Aviation Services (Sri Lanka) Limited

FORM OF APPLICATION

POST OF ARCHITECT

1. Name in Full (In Block Letters) :
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2. Whether Mr./Mrs./Miss ;
3. Postal Address :
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4. Telephone Number/s - Residence :
- Mobile :
- Office :
5. E-mail Address :
6. Date of Birth (DD/MM/YYYY) :
7. N I C No :
8. Civil Status :
9. Educational Qualifications

(a) Secondary Education(*Copy of certificate should be attached*)

Examination	Year	Subjects	Grade
GCE (O/L)			
GCE (A/L)			

(b) University Education (Degrees, Diplomas etc.) *(Copies of certificates should be attached)*

Name of the Degree/ Diploma	University/ Institution	Period		Field of Degree	Results (indicate Class or Grade)	Effective Date
		From (dd/mm/yyyy)	To (dd/mm/yyyy)			

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

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

10. Professional Qualifications (Examination/Memberships of Professional Bodies (Associate/Corporate Membership etc.) *(Copies of certificates should be attached)*

Institution	Name of the Examination/Membership	Membership Category	Effective Date

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

Programme	Institution & Country	Date/s

12. Special Achievements

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13. Employment History

(a) Present Post: *(Copy of Service certificate/ Appointment Letter should be attached)*

Post	Institution	Period		Discribe the work done
		From (dd/mm/yyyy)	To (dd/mm/yyyy)	

- (b) Previous Appointments
(Copies of Service certificates/ Appointment Letters should be attached)

Position	Institution	Period	
		From (dd/mm/yyyy)	To (dd/mm/yyyy)

- c) Work Experience

Please explain the key responsibilities handled under each position mentioned above in part (b)

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14. Extra Curricular Activities

15. Any Further relevant particulars (not indicated above):

16. Name of Two persons (with addresses) to whom reference can be made:

Name	Designation, Official Address & Official Tel. Nos.	Residential Address & Tel. No.
1.

2.

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.

Date:

Signature of Applicant;