



PARLIAMENT OF SRI LANKA

Post of Food and Beverage Assistant

01. (a) Name with initials (in Sinhala/Tamil):.....

.....
 (b) Names denoted by initials (in Sinhala/Tamil) :

.....
 (c) Full Name (in English Capital Letters): Mr./Mrs./Miss

02. National Identity Card
 Number

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03. (a) Private Address:

.....
 Telephone No:

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(b) Office Address :.....

.....
 Telephone No:

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(c) **Please indicate the address to where the admission to be posted**

Private

Office

04. (i) Date of Birth: Year Month Date
 (A copy of the Birth Certificate should be attached)

(ii) Age as at the closing date of applications: Years: Months: Days:

05. Civil Status: (Married/Unmarried)

06. Gender: (Male/Female)

07. State whether a citizen of Sri Lanka: (Yes/No)

08. Educational Qualifications: (Copies of relevant certificates should be attached)

Examination	Subject	Pass	Year
G.C.E O/L	Sinhala/Tamil		
	Mathematics		
	English		

09. Professional Qualifications (copies of the certificates should be attached)

.....

10.

Other Qualifications (copies of the certificates should be attached)

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11.

Experience (copies of the certificates should be attached)

<i>Institution</i>	<i>Post</i>	<i>Service Period</i>

12.

Details of Present Employment:

- (a) *Name and Address of the Institution:*
- (b) *Date of First Appointment:*
- (c) *Present Post:*
- (d) *Monthly basic salary:*
- (e) *Allowances:*
- (f) *Gross Salary:*

13.

Have you been convicted for any criminal offence by a Court of Law? (Yes / NO)

If so, give details:

14.

Have you served under the Government before? (Yes / NO)

If so, give details:

I do hereby certify that all the particulars furnished by me in this application are true and correct. I am also aware that, I am liable to be disqualified for this post if any particulars contained herein are found to be false or incorrect before selection, or to be dismissed without any compensation if such detection is made after appointment.

Date:

.....
Signature of the Applicant