



**SRI PALEE CAMPUS  
UNIVERSITY OF COLOMBO**

**FORM OF APPLICATION**

**Post:**

1. Name in Full :

2. Whether Mr./Mrs./Miss :

3. Postal Address :  
(Any changes should be  
communicated immediately)

Telephone No :

Residence-

Office -

4. (a) Date of Birth :

(b) Age as at closing date of Application

Years	Months	Dates

5. Civil Status :

6. State whether citizen of Sri Lanka by Descent  
or Registration. If by registration, give  
Registration No. :

7. State whether Sinhala, Tamil,  
person of Indian origin or Muslim :

8. Educational Qualifications (Pre-University) :

Name of Exam

Index No.

Subjects

Grades

9. University Education (Degree, Diploma, etc.) and the Name of University	From :	To :	Course followed (with subjects)	Date of final Examination (give Class or Grade)
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10. Professional qualifications : (Details with the dates of obtaining such qualifications)

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11. Postgraduate qualifications : (Details with the dates of obtaining such qualifications)

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12. Any other Academic Distinctions , Scholarships  
Medals, Prizes, etc. (Indicate the Institution  
from which such awards have been obtained)

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13. Research and Publications if any : (The Name  
of the Journal in which the Publications  
have been made and date of journal should  
be mentioned)

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14. Highest Examinations passed in Sinhala/English :

1. Sinhala :

2. English :

15. Present Occupation

a. 1. Post :

2. Date of appointment to such post :

3. Whether confirmed in the present post :

4. Place of work :

5. Salary scale of the post :

6. Present salary (a) Basic salary :  
(b) Allowance :

b. Previous appointments including those under training, if any , with dates

<u>Department/Institution</u>	<u>Post</u>	<u>Salary Scale</u>	<u>From</u>	<u>To</u>
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16. Where a period of experience is a requirement for the post applied , state period of such experience :

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17. I certify that all particulars stated by me in this application are true and accurate. I am aware that if any , particulars are found to be false or inaccurate prior to my selection, will be reject and that if particulars are found to be false or inaccurate after my selection, I will be dismissed from the service without compensation.

Date .....

.....  
Signature of applicant

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**NOTE :** Applicant in the service of Government Departments , Corporations or Statutory Boards Should forward their applications through the Head of the institution concerned.

**Forward :** I certify that the particulars given in columns 01 to 16 of application are correct according to the applicant's personal file. He/she could be/could not be released from this institution if selected for an appointment.

Date : .....  
(Delete whichever is inapplicable)

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Signature of the Chief Executive Officer