

**MINISTRY OF EDUCATION
STATE MINISTRY OF SKILLS DEVELOPMENT, VOCATIONAL
EDUCATION, RESEARCH AND INNOVATION**

CITY UNIVERSITY, KEGALLE CAMPUS

**APPLICATION FOR THE POST OF LECTURER (PROBATIONARY) /
SENIOR LECTURER GRADE II / GRADE I**

IMPORTANT: PLEASE FILL ALL THE BLANKS

~~POST APPLIED FOR~~

1. Name in Full: Rev/Mr./Mrs./Miss (underline Surname)
(If registered as a student in a University under any other name, please indicate such ~~name~~ within brackets)

2. (a) Postal Address (Any change should be communicated immediately)

(b) Contact Phone Number :

(c) Email address :

3. Date of Birth & Age (Please attach certified copy of Birth Certificate)

4. Civil Status

5. (a) Whether citizen of Sri Lanka (State whether by descent or by registration. If by registration, give reference number and date of certificate of citizenship)

(b) National Identity Card No.: (Please attach certified copy of National Identity Card)

6. University Education
(Degree, Diploma etc. Please attach certified copies of all certificates).

Degree/Diploma, etc & Name of University	From	To	Course followed	Date of Final Exam. & Results (Give GPA, Class/Grade)

7. Postgraduate Qualifications
(State whether by course work or research, duration and effective date. Please attach certified copies of all relevant certificates).

8. Academic Distinctions, Scholarships, Medals, Prizes etc.
(Indicate the Institution from which such awards have been obtained / received. Please attach certified copies of relevant certificates).

9. Research Publications, if any
(If space is insufficient, please use a separate sheet)

10. Proficiency in Languages: Highest Examination passed in

Sinhala

:Tamil :

English

:

11. (a) Present occupation & salary drawn (*give details and period*)

(b) Previous Employments, if any, with dates and periods

Department/Institution	Post	From	To	Reasons for Leaving
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12. Commendations/Punishments, if any, during your career in the University / Educational Institution

13. Have you ever been served with a Vacation of Post notice by any other University / Government Institution? If so please provide details.

14. Innovations, Inventions, Patents, Commercialized research findings etc.

15. ~~Extra-Curricular~~ Extra-Curricular Activities

16. Any other relevant particulars (not included above)

17. Names & addresses of two non-related referees: (give telephone nos. and email addresses)

Name	Address
1.	
2.	

18. 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 compensation ~~their inaccuracy~~ the inaccuracy detected after appointment.

Date

Signature of Applicant

(TO BE COMPLETED BY THE HEAD OF THE INSTITUTION WHERE APPLICABLE)

The application is recommended / not recommended ~~and forwarded~~ and forwarded.

Date: Signature of Head of Department/Division

The application is recommended / not recommended ~~and forwarded~~ and forwarded. If the applicant selected for the above post, he/she will be released / not be released to accept the appointment.

Date: Signature of Head of Institution

Note: The candidates are required to send their academic transcripts in support of the application, in consultation with the authorities of the respective Universities where they studied. ~~Their applications~~ Their applications will not be considered ~~be considered in absence of~~ the academic transcript.
