For Office Use Only

Open Competitive Examination for Recruitment to the Post of Parliamentary Officer – 2024

Medium of examination applied for Translation Skills paper:

	English/Sinhala - 2 English/Tamil -3
	(Write the relevant number in the box)
1.0	
1.1)	Full Name :
	(In Block Capitals)
1.2)	Full Name :
	(In Sinhala / Tamil)
2.0	
1.1)	Permanent Address :
1.0	(In Block Capitals)
1.2)	Official Address (if any) :
1.3)	(In Block Capitals) Address to which the Admission Card should be sent :
1.3)	
	(In Block Capitals)
3.0 3.1)	Gender : Male -0 Female -1 (Write the relevant number in the box)
3.2)	National Identity Card No:
3.3)	Contact Number:
3.4)	WhatsApp Number:
,	
3.5)	E-mail:
3.6)	Date of Birth : Year Month Date
3.7)	Age as at the date on which the qualifications are fulfilled:
	Year Month Date

4.0 Educational Qualifications:

4.1) G.C.E. (O/L) Qualifications:

- i. Year of Examination and month :
- ii. Index No. :
- iii. Results:

Subject	Grade	Subject	Grade
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

4.2) G.C.E. (A/L) Qualifications:

- i. Year of Examination and month:
- ii. Index No:....
- iii. Results:

	Subject	Grade
1.		
2.		
3.		
4.		

4.3) Details of the Degree:

	i.	Effective date of the Degree:
	ii.	Index No.:
	iii.	Name of the Degree:
	iv.	Subjects:
5.0 Other Ou	alificatio	ons:
6.0 Have you	ever be	en convicted by a court of law? (Put a tick (\checkmark) in the relevant box)
(If yes, gi	ve detai	ls)
		Yes No

- 7.0 Details of the receipt of payment of examination fee:
 - i. Paid office :ii. Receipt No. and date:iii. Paid amount :

Stick the receipt here so that it will not be detached. (Keeping a copy of the receipt with you would be useful.)

- 8.0 Certificate of the Applicant:
 - a) I declare that the details furnished by me in this application are true and accurate to the best of my knowledge. I agree to bear up the loss that would be caused to me in case any part of this application has not been filled in and/or has been filled in inaccurately.
 - b) Any information in the application found to be false disclosed before selection will render the applicant liable for disqualification, and to dismissal, if discovered after appointment.
 - c) I further declare that I will be abide by the rules and regulations that will be imposed by the Commissioner General of Examinations in connection with conducting of the examination.
 - d) I will not change any information later that I have furnished in this application.

Date:....

Signature of the Applicant

9.0 Attestation of the signature of applicant

I certify that Mr/Mrs/Miss who submits this application is personally known to me and that he/ she placed his/ her signature in my presence on, and that he/she has paid the due examination fees and has pasted the relevant receipt of such payment on this application form.

Date:		Signature
Full name of the a	ttester:	
Designation	:	
Address	:	
(Official stamp)		

10.0 <u>Certification of Head of Department / Institution</u> (Only for applicants serving in the Public Service/Provincial Public Service/Government Corporations/Statutory Boards)

Secretary General of Parliament,

I recommend and forward the application of Mr / Mrs /Miss who has been confirmed/not confirmed in the post of in this Institution. I certify that his/her work and conduct are satisfactory and that he/she has not been subjected to any disciplinary action or there is no intention to make such inquiry. He/she can be released/cannot be released from the service if selected for this post. (please cut off irrelevant words.)

Date:

Signature of Head of Department/Institution

(Official Stamp)