



**UNIVERSITY OF KELANIYA – SRI LANKA**

**APPLICATION**

Post: .....

01. Name in Full (BLOCK LETTERS):

.....  
.....

Rev./Dr./Mr./Mrs./Miss (delete whichever is not applicable)

02. Name with Initials : .....

03. Permanent Address : .....

.....  
.....

Tel: ..... Mobile: ..... E-Mail: .....

04. Date of Birth : .....

(Certified copy of Birth Certificate should be attached)

05. Age as on Closing date of Applications : Year : Months : Days :

.....

06. Civil Status : .....

07. Citizenship : .....

(State whether by descent or by registration)

08. National Identity Card No : .....

(Certified copy of NIC should be attached)

## Educational Qualifications

09. G.C.E. O/L Examination:

| Year..... |       | Year..... |       |
|-----------|-------|-----------|-------|
| Subject   | Grade | Subject   | Grade |
|           |       |           |       |
|           |       |           |       |
|           |       |           |       |
|           |       |           |       |
|           |       |           |       |
|           |       |           |       |
|           |       |           |       |
|           |       |           |       |
|           |       |           |       |
|           |       |           |       |

10. G.C.E. A/L Examination:

| Year..... |       | Year..... |       |
|-----------|-------|-----------|-------|
| Subject   | Grade | Subject   | Grade |
|           |       |           |       |
|           |       |           |       |
|           |       |           |       |
|           |       |           |       |

## Academic Qualifications

11. Academic qualifications **relevant to the applied post**:

| Name of the University | Degree or Course Title | Duration | SLQF Level | Effective date | Class/Grade |
|------------------------|------------------------|----------|------------|----------------|-------------|
|                        |                        |          |            |                |             |

12. **Other** Academic qualifications:

| Name of the University | Degree or Course Title | Duration | SLQF Level | Effective date | Class/Grade |
|------------------------|------------------------|----------|------------|----------------|-------------|
|                        |                        |          |            |                |             |

## Professional Qualifications

13. Professional qualifications **relevant to the applied post**:

| Name of the Institute | Course Title | Duration | NVQ Level | Effective date | Class/Grade |
|-----------------------|--------------|----------|-----------|----------------|-------------|
|                       |              |          |           |                |             |

14. **Other** Professional qualifications:

| Name of the Institute | Course Title | Duration | NVQ Level | Effective date | Class/Grade |
|-----------------------|--------------|----------|-----------|----------------|-------------|
|                       |              |          |           |                |             |

## Experience

15. Experience obtained relevant to the applied post

| Name of the Employer | Designation | From | To | Period | EPF No. | ETF No. |
|----------------------|-------------|------|----|--------|---------|---------|
|                      |             |      |    |        |         |         |
|                      |             |      |    |        |         |         |
|                      |             |      |    |        |         |         |
|                      |             |      |    |        |         |         |

## Other Information

16. Extracurricular Activities & Other relevant information

I hereby declare that the particulars furnished by me in the application are true and accurate. I am also aware that if any particulars contained herein are found to be false or incorrect, I am liable to disqualification if the inaccuracy is discovered before the selection and dismissal without any compensation if the inaccuracy is discovered after the appointment.

Signature of Applicant : .....

Date : .....

**Certified copies of the relevant certificates and other Documents should be attached to the application to prove the provided information.**

**For Public Sector Candidates**

Application for the post of ..... submitted by  
.....is forwarded herewith. If she/he is selected for the  
said post he/she can/cannot be released.

.....  
Signature of the Head of the  
Institution

Name:

Designation:

Seal: