## GENERAL SIR JOHN KOTELAWALA DEFENCE UNIVERSITY APPLICATION FOR THE POSTS OF ADMINISTRATIVE STAFF

For Office Use only	
NIC No	
A1: - 1 D1	Assistant Registrar Assistant Bursar
Applied Post	University Medical Officer
01. Full Name (In block letters)	
Name with initials	Dr/Mr/Ms
02. a. Permanent Address	
b. Tel No	Residence
	Mobile
c. E-Mail	

	d. Fax					
	e. Skype ID					
03.	Date of Birth	Year		Mont	th	Date
04.	Age (as at closing date)	Years		Mont	hs	Days
05	C' 11C( )					
05.	Civil Status	M	arriec	1		Single
06.	Sex	N	Male			Female
07.	Sri Lankan Citizenship	By I	Descei	nt	Ву	Registration
08.	School/s Attended					
09.	Highest Examination Passed in	Sinhala				
		Tamil				
		English				

10. University Education (Basic Degree)

Basic Degree	Effective Date	Awarded Institute	Medium	Special or General Degree	Subjects Followed	Class (Pl. indicate clearly)	Annexure No. (Copy of the Certificate)

## 11. Postgraduate Qualifications

(if space is insufficient please use a separate sheet)

Degree/Diploma Course	Effective		Full time		Duration				Credits		Annexure No. (Copy of	
(by research or by Examination)	Date	Institute Awarded	or part time	-	From	То	Yrs	Mts	Course work	Research / Thesis	Total	the Certificate)
											,	

12. Professional Qualifications

(Chartered Qualifications, Attorney at Law, etc.)

(if space is insufficient please use a separate sheet)

	Educational and professional qualifications								
Sr. No.	Qualification	Effective	Effective Duration  Institute Awarded						
110.	Qualification	Date	nistitute Awarded	From	То	Yrs	Mts	(Copy of the Certificate)	

13. a. Present Occupation: (if space is insufficient, please use a separate sheet)

		Nature of work		Period of service		e		
Place of Work	Designation/Post	assigned	Salary drawn per month	From	То	Yrs	Mts	No. (Copy of the
			permonu	From	То			Certificate )

b. Previous Occupations: (if space is insufficient, please use a separate sheet)

Sr.	Sr. No. Place of Work	Designation/Post		Annexure No. (Copy of Service			
140.		Designation/10st	From	То	Yrs	mts	Letter)

14. Details of Awards/Scholarships etc.

University/ Institution	Scholarships/ Awards/ Prizes/ Academic Distinctions	Year	Annexure No. (Copy of the Certificate )

eı	mployer/s for Training	/Study Programme:
i.	Institute/s	:
ii.	Nature of Training/	÷
	Study Programme	
iii.	Obligatory Period	÷
	Ç	
iv.	Date of Commencement of obligatory period	ent:
	of obligatory period	
v.	Date of Expiry of obligatory period	:
	obligatory period	
vi.	Monetary Value of the Bond	:
	the bolid	
	esearch & Publications re is insufficient, please	•
	e is insufficient, piease	use a separate sneet)

Have you entered in to a Bond/Agreement with any of your previous

15.

	ufficient, please use a separate sheet)
pecial details	of administrative experience (for Administrative Category)
	ufficient, please use a separate sheet)
	result for also
Any other relev	Want facte
Any other relev	evant facts
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Any other relev	vant facts
Any other relev	vant facts

## 20. Names, occupations and addresses of two non related referees

Name	Address	Occupation	Contact No

## 21. Certification by Applicant

I hereby certify that the particulars submitted by me in this application form 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 the inaccuracy is detected after appointment.

Further, I have enclosed copies of the following documents. (Please insert "  $\sqrt{}$  " mark)

Desc	ription of Document	Attached	Annexure No
1. Bir	th Certificate		
2. NI	C/Passport		
3. Bas	sic Degree Qualifications		
a.	Basic Degree Certificate		
b.	Transcript/ Detailed results sheet		
4. Pos	stgraduate Qualifications		
a.	Postgraduate Degree certificate		
b.	Transcript/ Detailed results sheet		

Description of Document			Attached	Annexure No
5. Authentica	ation lett	er from UGC (for foreign Degrees)		
6. Profession	al Qualif	fications		
a. Certifi	Certificates/ Letters			
b. Specia	Special Training			
7. Service Ce	rtificates	3		
Date :			ature of App	
22. To be co	omplete	d by the present employer (If any)	uture or ripp	neuri
Sir Joh	nn Kotela	/ cannot be released, if selected for the awala Defence University. omments :		
Signature	••••••			
Name	•			
Date				
For Office U	se Only			
Date Receiv	ed			
Eligibility		Yes		No
Category				
If No, Reaso	ons			
Registrar/S Assistant Re (Establishm	egistrar			
Comments Shortlisting Committee				