

## SPECIMEN APPLICATION

APPLICATION FOR THE POST OF ..... IN THE MERCHANT SHIPPING SECRETARIAT OF  
MINISTRY OF PORTS, SHIPPING AND AVIATION

|   |  |
|---|--|
| Write the relevant medium number in the box |  |
|---|--|

(Sinhala - 2/Tamil - 3/English - 4)

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|--|

(For Office use only)

**Note :** The medium of application cannot be changed.

01. Name of the Applicant :

(i) Name with initials (Mr./Mrs./Miss.) : .....

.....  
*Eg. :* GUNAWARDHANA, H. M. S. K. (In English capital letters)

(ii) Full Name (Mr./Mrs./Miss) : .....

.....  
(In English capital letters)

(iii) Full Name : .....

.....  
(In Sinhala/Tamil)

02. Address and Telephone No. :

(i) Official Address : .....

Phone Number : .....

(ii) Permanent Address : .....

Phone Number : .....

Mobile Number : .....

03. Date of Birth :

Year : ..... Month : ..... Date : .....

04. Age as at ..... 2021 (Application closing date) :

Years : ..... Months : ..... Days : .....

05. National Identity Card Number : .....

06. Gender : .....

07. Marital status : .....

08. Educational Qualifications :

| <i>Qualification</i> | <i>Year obtained Qualification</i> | <i>Subject Stream</i> | <i>Grade</i> | <i>Name of Institution</i> | <i>Remarks</i> |
|----------------------|------------------------------------|-----------------------|--------------|----------------------------|----------------|
|                      |                                    |                       |              |                            |                |

09. Professional Qualifications :

| <i>Qualification</i> | <i>Year obtained Qualification</i> | <i>Subject Stream</i> | <i>Grade</i> | <i>Name of Institution</i> | <i>Remarks</i> |
|----------------------|------------------------------------|-----------------------|--------------|----------------------------|----------------|
|                      |                                    |                       |              |                            |                |

10. Particulars of Experience (After obtaining Class I Certificate) :

(a) Corporate Experience :

| <i>Institute</i> | <i>Post</i> | <i>Functions of the Post in brief</i> | <i>Period of Service</i> | <i>Remarks</i> |
|------------------|-------------|---------------------------------------|--------------------------|----------------|
|                  |             |                                       |                          |                |

(b) Maritime Professional Experience :

| <i>Vessel Name</i> | <i>Vessel Capacity</i> | <i>Rank</i> | <i>Sea Service<br/>(After obtaining Class I certificate)</i> |             | <i>Remarks</i> |
|--------------------|------------------------|-------------|--|-------------|----------------|
|                    |                        |             | <i>Months</i>  | <i>Days</i> |                |
|                    |                        |             |  |             |                |

11. Contributions to the field (Publications and innovations) :.....

12. Proficiency in Computer Literacy :

(i) Degree : .....

(ii) Diploma : .....

(iii) Certificate Course : .....

13. Have you every been convicted by a Court of Law ? :

I, hereby declare that all the information provided by me in this application is true and correct, that all the parts have been duly completed and that I am aware that I will be subject to disqualification if this declaration is found to be untrue prior to my selection and dismissal if such a situation is discovered after the selection.

.....,  
Signature.

Date :.....

14. Attestation of the Signature of the Applicant :

I certify that Mr./Mrs./Miss..... who has submitted this application, is personally known to me and that he/she placed his/her signature on ..... in my presence.

Name : .....

Designation : .....

Address : .....

Date : .....

15. Recommendation of Head of Department (Only for Public Service Applicants) :

I certify that the above mentioned Mr./Mrs./Miss ..... Serves at the Ministry/ Department/Institute of ..... that the information furnished by him/her is accurate, that work and attendance are satisfactory, that no allegations have been levelled against him/her and that if he/she is selected for the post, he/she can be released from the service of this institution.

.....,  
Signature of Head of Department.  
(Place the official stamp)

Date :.....

09-68

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