APPLICATION FORM

Pos	Post Applying:						
1.	Personal Details						
1.1	Full Name	: Mr./ Ms		• • • • • • • • • • • • • • • • • • • •			
1.2	Name with Initials	:					
1.3	Date of Birth	:	1.4 Age a	s at 05.02.20	024: Y M D		
1.5	Residence Address	:					
1.6	Postal Address	•					
_,,							
17	7 Mobile No.						
	.8 Residence Tel. No. :						
1.8	Residence Tel. No.	:	•••••				
1.9	National Identity C	ard No.:					
2.	Educational Qualif	ications:					
2.1	Bachelor's Degree						
	Degree	Universi	ty/ Institute	Valid	Copy of the certificate		
				Date	to be attached		
					Annexure ()		
					Annexure ()		
2.2	Master's Degree						
	Master's Degr	ee Universi	ty/ Institute	Valid	Copy of the certificate		
				Date	to be attached		
					Annexure () Annexure ()		
		L			Aimexure ()		
2.3	Doctorate						
	Doctorate Deg	ree Universi	ty/ Institute	Valid	Copy of the certificate		
				Date	to be attached		
					Annexure () Annexure ()		
					Aillexule ()		

2.4 Diploma/ Higher Diploma

Diploma/	University/		Duratio	Copy of the	
Higher	Institute	From	To	No. of	certificate to
Diploma				months/	be attached
				Years	
					Annexure ()
					Annexure ()
					Annexure ()

2.5 Certificate Courses

Certificate	Institute		Duratio	Copy of the	
Course		From To No. of		certificate to	
				months/	be attached
				Years	
					Annexure ()
					Annexure ()
					Annexure ()

3. Professional Qualifications:

Membership obtained	Institute	Valid Date	Copy of the
			certificate to be
			attached
			Annexure ()
			Annexure ()
			Annexure ()

4. Work Experience:

Years &	Months	Position	Organization	Copy of the
From	To			certificate to be
				attached
				Annexure ()
				Annexure ()
				Annexure ()

5. Other Skills and Performances:

Area of acquired skills/ Performances	Copy of the proof documents to be attached
	Annexure ()
	Annexure ()

The Sri Lanka Tourism Development Authority

6. Details of Two Non Related Referees

Signature of the	e applicant	Date
of my knowledg	ge and forward the same for your kind consider	cation.
•	ify that the above particulars furnished by me a	
Email	:	
Contact No.	:	
Address	:	
6.2 Name	:	
Email	:	
Contact No.	:	
Address	:	
6.1 Name	······	

The Sri Lanka Tourism Development Authority

APPLICATION FORM

Post Applying :								
Employee Deta								
1.1 Name:								
1.5 Designation		• • • • • • • • • • • • •		••••••	••••••		•••••	• • • • • • • • • • • • • • • • • • • •
Educational Qu	ıalificatior	ıs						
2.1 Bachelor's I	Degree							
Degr	ee	Univ	ersity/ Insti	tute	Val	lid C	ору (of the certificate
					Da			be attached
								ure ()
						Aı	nnex	ure ()
2.2 Master's De	gree							
Master's Degree		Univ	ersity/ Insti	tute	Val	- I J		
							be attached	
				exure () exure ()				
2.3 Doctorate Master's I	Degree				of the certificate			
					Da		to be attached Annexure () Annexure ()	
2.4 Diploma/ H						·		
Higher		ersity/ titute	E	_	ration		<u> </u>	Copy of the certificate to
Diploma/ Diploma	ins	iitute	From		Го	No. o month Years	ıs/	be attached
								Annexure ()
								Annexure ()
								Annexure ()
								Annexure ()
2.5 Certificate (Courses							
Certificate	Ins	titute		Du	ration			Copy of the
Course			From		Го	No. o		certificate to
						month Years	•	be attached
							-	Annexure ()
								Annexure ()

3.	Professional	Qualifications
\sim	I I OI COOI OII MI	

Membership obtained	Institute	Valid Date	Copy of the
			certificate to be
			attached
			Annexure ()
			Annexure ()
			Annexure ()

4. Work Experience:

4.1 Work experience prior to SLTDA

Years &	Months	Position	Organization	Copy of the
From	To			certificate to be
				attached
				Annexure ()

4.2 Work experience at SLTDA

	Duration		Division	Position	Category	Grade
From	То	No. of years & months				

5. Other Skills and Performances:

Area of acquired skills/ Performances	Copy of the proof documents to be
	attached
	Annexure ()
	Annexure ()
	Annexure ()

I do hereby certify that the above particulars furnished by me a knowledge and forward the same for your kind consideration.	re true and correct to the best of my
Signature of employee	 Date
Head of the Department	Date