For Office Use	

# GENERAL SIR JOHN KOTELAWALA DEFENCE UNIVERSITY SOUTHERN CAMPUS

### **APPLICATION FORM**

										NIC	No.	
Post -: .												
Name ( I	n blo	ck letters )										
	a.	Full name										
												••••
	b.	Name with initials: Mr / Ms.:										••••
	D.											
2.	а	Permanent Address:								• • • • • • •		
۷.	a.											
	b.	Tel: Res. No. :		M	lobil	e N	o. :					
	C.	E-mail:		Fa	x:.							
	d.	Skype ID:										
								_				T
3.	Da	te of Birth: Year Month Date		. Ag As a		sing	g date	∍)	Years	M	onths	Days
			·					L				
E	C	ivil Status Married Single	6	c	`ov:		Mal	e	Fe	male		
5.	C	VII Status	0.	. S	Sex:							
7.	Sı	ri Lankan Citizenship: By Descent	Ву	Reg	gistr	atio	n	7				

9.	Highest Examination	passed in the fo	llowing Lang	uages:					
				5	Sinhala				
				٦	「amil				
				E	English				
10.	Educational Qualificat	iono :							
10.	a) GCE (O/L) Examinat			(b) GCE	(A/L) Exa	mination			
ame of t	he School:		Name of the						
idex No:		Year :	Index No:			Year :			
	Subject	Grade		Sul	oject		Grade		
(Attach	Copies of Certificates)								
(Allacii									
11.	Vocational Level Qua	lifications Diplor	na & Certific	ates:					
				Period		Subjects followed an	d _		
	University/Institution	Diploma/Certifi	cate Course	From To		the effective		Results	
						uate			
	(Attach Copies of Certificate	es)							
12.	Other Qualifications, i	f any							
	• • • • • • • • • • • • • • • • • • • •								
	• • • • • • • • • • • • • • • • • • • •								

8.

Schools Attended:

13.	a. Present C	Occupations: (if space	is insuffic	cient, ¡	please use	e a sepa	rate sheet)		
	Place of work	Designation & nature	of work	Salary drawn			Period of stay		
	1 lace of work	assigned			per month		From	То	
		-	<u>'</u>			•	•		
b.	Previous Occupa	ation/s: (if space is in:	sufficient,	pleas	se use a so	eparate :	sheet)		
	Diagonal	Designation &	Salary d	rawn	Period o	of stay			
	Place of work	nature of work assigned	per mo		From	То	Reason fo	or Leaving	
		, , ,							
	(Attach Copies of Certi	l ificates)							
		A 1.1							
14.	Extra Curricular	Activities:							
15.	Names, occupat	tions and addresses o	of two non	relate	ed referee	s:			
	Name	Address		Oc	cupation		Contact N	0	

#### 16. 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 following documents. (Please put " $\sqrt$ " mark)

<ul><li>A. Educational Q</li></ul>	ualifications	B. Other	Certificates	
1. O/L		1		
2. A/L		2		
3. Diplom	a	3		
C. Service Certifi	cates	D. Birth (	Certificate	
Date :			Signature of Applica	nt
17. To be comple	eted by the present emp	loyer (If any)		
Applicant can/ canr Any Special Comme	not be released, if selecte nts :	d for appointm	ent.	
		•••••	Signature	·••••
Designation: Date::		<b></b>		
For Office Use				
Date Received Eligibility	Yes		No	
If No, Reasons	.30		1	
Registrar/Senior Assistant Registrar (Establishment)				
Comments of Head/Dean				

For Office Use	

## GENERAL SIR JOHN KOTELAWALA DEFENCE UNIVERSITY RATHMALANA

### **APPLICATION FORM**

			NIC	No.
Post -:				
Name (In	bloo	ck letters )		
	a.	Full name		
	b.	Name with initials: Mr / Ms.:		
2.	a.	Permanent Address:		
		Tel: Res. No. :		
		E-mail:		
	d.	Skype ID:		
3.	Da	te of Birth: Year Month Date	4. Age: Years Mo	onths Days
			(As at closing date)	
		Married Circle	M.I. E. I	7
5.	Ci	ivil Status Married Single	6. Sex: Male Female	
7.	Sı	ri Lankan Citizenship: By Descent	By Registration	

8.	Schools Attended:								
9.	Highest Examination	passed	d in the fo	llowing Lang	uages:				
					1	Sinhala			
						Tamil			
						English			
10	Educational Qualificat	tiona :							
10.	Educational Qualificat				(b) CCI	- (Λ/L) Ενσ	mination		
ame of t	a) GCE (O/L) Examinat			Name of the		E (A/L) Exa			
				Index No:					
	Subject		Grade	maex res m		bject		Gra	
(Attach	Copies of Certificates)							1	
11.	Vocational Level Qua	lificatio	ons Diplon	na & Certific	ates:				
		5	/O .::		Period		Subjects followed and		
	University/Institution	Diploma/Certific		cate Course	From	То	the effective date		Results
	(Attach Copies of Certificate	es)							
12.	Other Qualifications, i	if any							
	,	•							
				••••••					
									•••••
									•••••

13.	a. Present C	Occupations: (if space	is insuffic	cient, <sub> </sub>	please use	e a sepa	arate sheet)		
	Place of work	Designation & nature	5	Salary draw		Period o	of stay		
	riace of work	assigned		per month		From	То		
b.	. Previous Occup	ation/s: (if space is in	sufficient	, pleas	se use a se	eparate	sheet)		
	<b>D</b> . ( )	Designation &	Salary d	rawn	Period o	of stay			
	Place of work	nature of work assigned	per mo		From	То	Reason for Leavin		
		assigned							
ĺ	(Attach Copies of Certi	:ificates)	J				.		
14.	Extra Curricular	Activities:							
		_							
15.	Names, occupat	tions and addresses o	of two nor	n relate	ed referee	s:			
						·			
	Name	Address		Occ	cupation		Contact N	lo	

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A. Educational C	Qualifications	B. Other	Certificates
1. O/L		1	
2. A/L		2	
3. Diplom	na 🔲	3	
C. Service Certifi	icates	D. Birth C	Certificate
Date :			Signature of Applicant
17. To be complete.	eted by the present employ	er (If any)	
Applicant can/ cans Any Special Comme	not be released, if selected fents:	for appointme	ent.
Name :			Signature
_			
For Office Use			
Date Received		<del>,</del>	
Eligibility	Yes		No
If No, Reasons			
Registrar/Senior Assistant Registrar (Establishment)			
Comments of Head/Dean			