

UNIVERSITY OF PERADENIYA SRI LANKA

FORM OF APPLICATION

POST	APPLIED FOR:	
1.	Name in Full: Rev./Mr./Mrs./Miss [Underline [If registered as a student in a University under any of please indicate such name within brackets]	
2.	Postal Address [Any change should be communicated immediately]	
3.	Contact Telephone No.	E-Mail - Fax No
4.	Date of Birth & Age [Please attach copy of Birth Certificate]	
5.	Nationality	
6.	Civil Status	
7.	Whether Citizen of Sri Lanka [State whether by descent or by registration; if by registration, give reference number and date of certificate of citizenship]	

8.	Educational Qu	ıannc	cations	[Please atto	ich copies o	of all relevant certificat	esj
8.	University Educat Degree/Diploma, Name of the Unive	t <mark>ion</mark> etc.	&	From	<u>To</u>	Course Followed	Date of Final Exam & Results [Give Class/Grade]
9.	Special Qualification [Professional, etc			copies of all	relevant ce	ertificates]	
10.	Postgraduate C [State whether by relevant certificates	course			uration and	l effective date – Pleas	e attach copies of all

11.	[Indi	demic Distinctions, Scholarships, Medals, Prizes, etc., cate the Institution from which such awards have been obtained – Please attach copies of ant certificates]
12.		earch Publications, if any pace is insufficient, please use a separate sheet]
13.	Prof	ficiency on Languages: Highest Examination passed in,
		Sinhala -
		Tamil -
		English -
14.	(a)	Present Occupation : 1. Post :
		2. Date of appointment to such post:
		3. Whether confirmed in the present post:
		4. Place of work:
		5. Salary scale of the post:
		6. Present salary: (a) Salary Step -
		(b) Allowances -

	Depa	<u>rtment/</u> l	<u>Institution</u>	<u>Post</u>	From	<u>To</u>	and periods Reasons for Leaving
	(c)	Experi	ence, if any	7			
	` _	•	, •				
	(d)	Particular if any:		nd Obligations to	Higher Educatio	nal Insti	tutions/Institutes
		(i)	Obligatory l	Pariod :			
		(ii)	Amount Du	e :			
	Cor	nmenda	ations/Pun	ishments, if any	·		
5.				n the University			
5.	Dur	ing you					
5.	Dur	ing you	al Institution	on			
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17.	Any other relevant particulars [Not included above]				
18.	Names of two Non related referees [With positions and addresses]				
	<u>Name</u>	Address			
	1.				
	2.				
19.	Where a period of experience is a requirement for the post applied, state period of such experience with details:				
20.	I am aware that if any of these particulars a	d by me in this application are true and accurate. re found to be false or inaccurate, I am liable to e dismissed without any compensation if the			
	Date	Signature of Applicant			

21.	[TO BE COMPLETED BY THE HEAD OF THE DEPARTMENT WHERE APPLICABLE]					
	(a)	Is the applicant on probation?	Yes / No			
	(b)	Was any disciplinary action taken against the applicant?	Yes / No			
	(c) I recommend/ not recommend the application.					
		Date	Signature of Head of Department			
Note: If space not sufficient to enter the details under each column use a separate sh attach to the end.						