SOUTH EASTERN UNIVERSITY OF SRI LANKA

Accelerating Higher Education Expansion and Development (AHEAD) project

FORM OF APPLICATION

POST APPLIED FOR ....

1. Name in Full	
2. Whether Rev./Mr./Mrs./Miss	
3. Postal Address : (any change should be communicated immediately)	
4. Telephone Number & e mail address (if available)	

		6. Civil Status : (Married / Unmarried / divorced)
5. Date of Birth & Age:		
7. Whether Citizen of Sri Lanka : (state whether by descent or by registration: if by registration, give reference number & date of certificate of citizenship)		NIC No:

8. Education – Schools attended	From	To
(i).		
(ii).		
(iii).		
(iv).		

9. University Education: (Degrees, Diplomas etc.) University	From	To	Course followed (with subjects)	Results (give Class or Grade)

10. Postgraduate qualifications & dates of obtaining same :	
11. Any other academic distinctions, Scholarships, Medals, Prizes, etc. (indicate the institution from which such awards have been obtained)	
12. Research & Publications, if any : (if space is insufficient, please use separate sheet of same size.)	
13. Highest Examination passed in Sinhala / Tamil :	
14. (a) Present **occupation**, place, date of appointment and basic salary drawn :	

(b) Previous appointments, if any, with dates :

Department / Institution	Post	From	To

15. Extra - Curricular activities :	
16. Any further relevant particulars : (not included above) :	

17. Names of two persons (with addresses) to whom reference can be made :	Name Address 1. .... …... …... .... Tel. No: Fax No: e-mail : 2 .... …... …... .... Tel. No: Fax No: e-mail :

18. I hereby certify that the particulars submitted by me in this application 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.

Date: ....
                                                            Signature of Applicant