



SOUTH EASTERN UNIVERSITY OF SRI LANKA

FORM OF APPLICATION

Application for the Post of:

Faculty:

Department:

1. Name in Full: (underline Surname)

(If registered as a student in a University under any other name, please indicate such name(s) within brackets supported by an affidavit)

Rev/Prof/Dr./Mr./Mrs./Ms./Miss

.....

Name with initials :

2. i. Sex: Male Female

ii. Civil Status: Single Married

3. a) Postal Address (Any change should be communicated immediately)

.....

b) Contact Phone Number

Mobile: Residence: Office:

c) E-mail Address :

4. Date of Birth (Please attach copy of Birth Certificate) Age at Closing Date

Year	Month	Date

Years	Months	Days

5. Citizenship: By Descent By Registration Dual Citizenship
 (If by registration indicate Registration No /Details of Dual Citizenship)

6. National Identity Card No:

7. School Education:

Name of School(s) Attended	From	To

8. University Education: First Degree (Duration and effective date should be given. Please attach copies of all relevant certificates with transcripts).

Name of the University	Duration		Course followed with Subjects (Special/ General/mode of study*)	Results (give class or grade with GPA & effective date)
	From	To		

*i.e: Full Time, Part Time, Distance Mode, Online Mode, Top up etc.

9. Postgraduate Qualifications: (State whether by course work or research, duration and effective date. Please attach copies of all relevant certificates with transcripts).

Institute & Mode of Study*	From	To	Year

*i.e: Full Time, Part Time, Distance Mode, Online Mode, Top up etc.

10. Other Diploma, Membership, Fellowships etc. (attach copy of certificate)

Institute	Diploma etc.	Durations and Credits	Year

11. Professional Qualifications: (attach copy of certificate)

Institute	From	To	Examination passed or Degree obtained etc.

12. Language Proficiency (Please tic ✓):

Language	Ability of General Communication				Ability to Teach / Work			
	Very good	Good	Fair	No Knowledge	Very good	Good	Fair	No Knowledge
Sinhala								
Tamil								
English								
Other								

13. Research Publications, if any. (if space is insufficient, please use a separate sheet)

(I) Books

No.	Name of the Book / Chapter of Book	Date of Publication & Name of Publisher	Author(s)	ISBN No:
i ii iii				

(II) Abstracts

No.	Title of Article	Author(s)	Source and date of the publication
i ii iii			

(III) Conference Papers (full Papers)

No.	Title of Article	Author(s)	Source and date of the publication
i ii iii			

(IV) Journal Papers

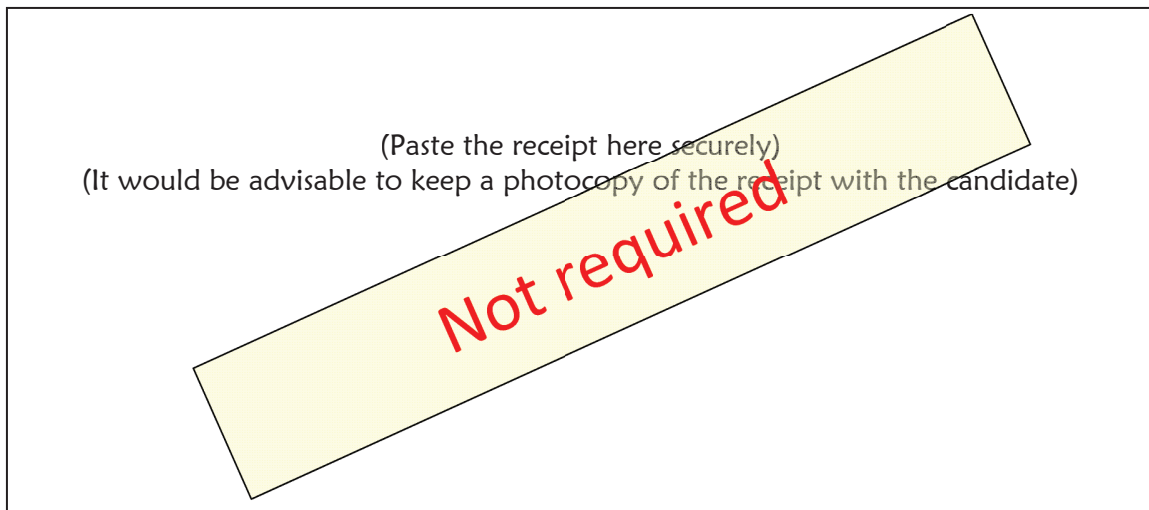
No.	Title of Articles	Author(s)	Source and year of publication	Nature of Journal (Peer Review & Indexing)
i iii				

Note : - First degree Dissertation/ Postgraduate Thesis are not considered as publications

16. Two non related Referees:

	<u>Name</u>	<u>Designation</u>	<u>Address & Contact details with email Address</u>
(i)
(ii)

17. Paste the cash receipt properly here



18. I hereby certify that the particulars submitted by me in this application are true and accurate. I am aware that if any of the particulars are found to be false or inaccurate, I am liable to disqualify before selection and /or to be dismissed without any compensation, if the inaccuracy is detected after the appointment.

Date:.....

.....
Signature of the Applicant
(Should be inked)