Application for the Position of Data Entry Operator - Project Management Unit

1.0 Personal Information:

1.1 Name with Initials at the end (In English block capitals) :- ....

....

1.2 Name in full (In English block capitals) :- ....

....

1.3 Name in full (In Sinhala/Tamil) :- ....

....

1.4 Permanent Address (In Sinhala/Tamil) :- ....

....

1.5 Permanent Address (In English block capitals) :- ....

....

1.6 Gender:- ....

1.7 Marital Status:- ....

1.8 National Identity Card No:- ☐☐☐☐☐☐☐☐☐☐☐☐

1.9   Date of Birth: - Date ☐☐ Month ☐☐ Year ☐☐☐☐

1.10 Telephone No: ☐☐☐☐☐☐☐☐☐☐

1.11 District:-   ....

1.12 Grama Niladari Division :- ....

1.13 Email Address:- ....

2.0 Educational Qualifications:-   ....

....

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....

....

3.0 Working Experience :-

(Most recent appointment first)

No.	Position	Institution/Station	From (D/M/Y)	To (D/M/Y)

4.0 Professional   Qualifications:-

....

....

5.0 Written Thesis/ Projects/ Articles :-

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....

6.0 Other Qualifications :-

....

....

7.0 Non-Related Referees

Name / Telephone No	Position	Address
1.		
2.		

8.0 **Declaration of the Applicant**:

(a) I respectfully declare that the particulars furnished by me in this application are true and correct to the best of my knowledge. I agree to bear the loss which may occur due to incomplete and /or incorrect completion of any part of this application. Further, I state that, all sections of this application completed are true and correct to the best of my knowledge.

(b) I shall not subsequently change any information stated above.

…………………………   …..…………………………………...
            Date   Applicant's Signature

9.0 **Attestation**:

I do hereby certify that Mr./Mrs./Miss …………………………………………...……………………………
…..is personally known to me and placed his/her signature in my presence
on ……………………………

Date ……………………………   …..……………………………………...
                                                                              Signature of Certifying

Officer Name: ....

Designation: ....

Address: ....

10.0 **(This part is applicable only for candidates who engage in government employment) Attestation of the head of the Department/ Institution**:

I hereby certify that Mr./Mrs./Miss …………………………………………………………………………
…..................................who is working in this ministry/department/institution, is working in the post of
…………………………… and his/her work and conduct are satisfactory, no disciplinary action
pending against him/her and no decision has been taken to impose any such in the future. If he/she will
be selected for this post, he/she can/cannot be released from the service.

Date ……………………………   …..……………………………………...
                                                                              Signature of the Head of the
                                                                              Department or Authorized Officer.

Name: ....

Designation:-   ....

Ministry / Department:-   ....