SPECIMEN APPLICATION

Recruitment for the Post of Legal Officer (Executive Category –Grade III) of the Department of Probation and Child Care Services-Open Basis - 2024

(For office

Medium appearing for the interview			
(write the number corresponding to the med use only)	ium applied for in the	cage) Sinhala -2 / Tamil -3/ Engli	sh -4

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Note: - It will not be allowed to change the medium applied.

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1.	1.1	Name in Full (Mr. /Mrs./Miss) (In Sinhala / Tamil)	:		
	1.2	Name in Full : (In block capitals)			
	1.3	Name with initials (Mr. /Mrs./ (In Sinhala / Tamil)	Miss) :		
	1.4	Name with initials (Mr. /Mrs./I (In block capitals)	Miss :		
2.0 2.1 Permanent address : (In Sinhala / Tamil)					
	2.2	Permanent address : (In block capitals)			
	2.3	Telephone No. :			
3.0	3.1	Gender : Female - 0			
Male- 1 (write the relevant number in the cage)					
	3.2	Marital Status: Married - 1			
		Unmarried -0	(write the relevant number in the cage)	
	3.3	Date of Birth :	/ear:Date:		
	3.4. Age as at 27.07.2025: Years:Months:Days:				
	3.5	.5. National Identity Card No.:			
4.0	4.1	1 Details of qualifications acquired in relation to the notification for calling applications for the interview.			
		Qualification	Institution from which the qualification acquired	Date Acquired	

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4.2 Date of taking oaths as an Attorney-at-Law in the Supreme Court:.....

4.3 Details in relation to acquiring each qualification under No. 06 of the notification for calling applications:

i. Additional Educationa	l Qualifications:	
Qualifications	Acquired Institution	Date Acquired
	•••••	
ii. Additional Profession	al Qualifications:	
Qualifications	Acquired Institution	Date Acquired
iii. Knowledge on Inforr	nation Technology :	
Qualifications	Acquired Institution	Date Acquired
iv. Proficiency in Langu	ages :	
Qualification	Acquired Institution	Date Acquired

 Have you ever been convicted for any charge by the court? (Mark (✓) in the relevant cage) If "yes" describe).....

6. Certification of the Applicant:

I, do hereby declare that the particulars furnished by me in this application are true and accurate and have duly completed all the sections in it, and I am aware that I will be disqualified if this statement made by me is found to be incorrect prior to appointment or will subject to dismissal if it is found after appointment. Further, I agree to abide by all the rules and regulations.

yes No

Date

Signature of the Applicant

7.0 Attestation of the Applicant's Signature :

I, do hereby certify that Mr./Mrs./Miss. forwarding this application is known to me personally and that he/she placed his/her signature before me on

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Date

Name in Full : Designation :

Designation : Date :

(Confirm by placing the official seal)

Signature of the Attester

8.0 Recommendation of the Head of the Department: (only for the officers in public service)

I certify that Mr. Mrs. Miss mentioned above is serving in this institution and the particulars furnished by him/her are correct. Further, his/her work and attendance are satisfactory and has no charge against him/her and can be released from the duties of this institution if selected for this post.

Signature of the Head of the Department

Name : Title : Address: Date : (Place the official seal)

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