UNIVERSITY OF COLOMBO

SRI LANKA

FORM OF APPLICATION

POST : Assistant Lecturer

DEPARTMENT: Buddhist Studies

1. Name in Full : Underline Surname		
2. Whether Rev./Mr./Mrs./Miss		
3. Postal Address : (any change should be communicated immediately)		
4. Telephone Number		
5. Date of Birth & Age :		6. Civil Status :
7. Whether Citizen of Sri Lanka : (state whether by descent or by registration: if by registration, give reference number & date of certificate of citizenship)		
8. Education - Schools attended	From	To
(i)		
(ii)		
(iii)		
(iv)		

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

Note (I): If you were registered as a student in a University under any other name, please indicate such name within brackets.
Note (II) : State Index Number if known and Campus.

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

17. 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: .....

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Signature of Applicant