

UNIVERSITY OF COLOMBO

SRI LANKA

FORM OF APPLICATION

POST : Temporary 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:

.....
Signature of Applicant