FOR OFFICE USE ONLY

SPECIMAN APPLICATION FORM

Recruiting application for the post of General Manager of Southern Provincial Road development Authority

1.	1.1. Name in Full - in English (Ex: Ranjith Samaraweera Wickramarathne)	
	1.2. Name in Full - in Sinhala (Ex: රංජිත් සමරවීර විකුමරත්න)	
	1.3. Name with Initials – in English (Ex: Mr./ Mrs./ Miss. Wickramarathne R.S.)	
	1.4. Name with Initials – in Sinhala (Ex: ආර්.එස්.විකුමරත්න මයා/ මිය/ මමය)	
2.	National Identity Card No:	
3.	Date of Birth: Y Y Y M M D D	
4.	Age (as at 20/04/2024) Y Y M M D D	
5.G	ender : Male Female	
6.	Marital Status : Single Married	
7.	Mobile Number:	
8.	Email Address:	
9.	Permanent Address of the Applicant :	

University Education Qualifications (Degrees)(Copies of Certificates should be attached)

Name of	University	Period		Field of	Results(Indicate	Effective
the Degree		From	То	Degree	Class or Grade)	Date

Postgrautate Qualifications (Copies of Certificates should be attached)

Name of the	University/Institution	P	eriod	Subject Area/s	Effective Date
Degree/Postgrauate diploma		From	То		

10. Professional Qualifications

•	1
Name of the Course/Examination/ Membership	Effective Date
	Course/Examination/

Γ		certificate or Appoinment letter					iled)	
	Post	Institution			Period		Describe the work done	
L			From		То		work done	
b)	Preveious Employment (Copy of service certificates or Appoinment letters sho							ould be attache
	Post	Institution	Period			Key responsibilities		Total service
			From	To)			
-								
-								
-								
L								
	Date of obtai	ined Associate	Members	hin d	f Sri 1	Lanka In	stitute of Engin	eering or IJK
	stitute of Eng			mp (Juliu III	stitute of Linging	coming of the
•••	• • • • • • • • • • • • • • • • • • • •	••••	• • • • • • • • • • • •	•••••	• • • • • • •	•••••	•••••	

I hereby declare that the above-mentioned information is true and correct according to my knowledge and belief. I am aware that I will be dismissed from service if found to be unsuitable after appointment. I will not change any of the information mentioned here later. Name of the Applicant with initials - Address Signature of the Applicant Date - 13. Attestation of the applicant's signature is known to me personally, he/she placed his/her signature before me on Date Signature of the Attester Full name of the officer (Who attests the signature):..... Position/ Designation :..... Address:.... (Confirm with official stamp) 14. If the applicant is a government servant, attestation of the Head of the Department I hereby forward the application of Mr./Mrs./Miss I would like to inform you that he/ she is working as a permanent/ temporary/casual employee in this Ministry/ Department and if he/ she is selected for this post he/she can/ cannot be released from the service. Signature of the Head of the Department or the Authorized Officer Date :..... Position/ Designation :..... Ministry/ Department :

(Confirm with official stamp)

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