(For office use only)

**Human Rights Commission of Sri Lanka**

**Application for the Post of ……………………………**

1.0 Personal Information:

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

(Ex : GUNAWARDHANA H.M.S.K)

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

(Ex : HERATH MUDIYANSELAGE SAMAN KUMARA GUNAWARDHANA)

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 Civil Status:-

1.8 Nationality:-…………………………………………………………………………………………………………………………………………

1.9 National Identity Card No:-

1.10 Date of Birth: - Date Month Year

1.11 Age as at closing date of the application:-……………………………..

1.12 Telephone No :- Land –

Mobile-

2.0 Educational Qualifications:-

2.1 G. C. E. (A/L) Examination: Year: - …………………………………… Index No :- …………………………………………

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| --- | --- | --- | --- | --- | --- |
|  | Subject | Grade |  | Subject | Grade |
| 1. |  |  | 3. |  |  |
| 2. |  |  | 4. |  |  |

3.0 Higher Educational Qualifications:-

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Degree/Post Graduate Degree/Diploma/Post Graduate Diploma etc. | Name Of The Institute | Subjects  Followed | Duration | | Effective Date | Results  (Pl Indicate Class or Grade) |
| From | To |
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4.0 Working Experiences:-

5.0 Other qualifications:-

6.0 Non-Related Referees

|  |  |  |
| --- | --- | --- |
| Name / Telephone No | Position | Address |
| 1. |  |  |
| 2. |  |  |

7.0 **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

8.0 **(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:-