

G.C.E. (A/L) Examination1st Attempt

Year :

Index No :

2nd Attempt

Year :

Index No :

Subjects	Grade

Subjects	Grade

Advanced Educational Qualifications:

Name of the Degree	Year of passing	University

08. Professional/Other Qualifications:

Name of Course	Institute	Duration of the Course	Pass/Grading and year

09. Experience :

Institute	Period of Service		Position Held	Experience	Reason for Leaving
	From	To			

10. The details of two non-relatives persons, who can provide details about you.

01. Name : 02. Name :
Address:..... Address:
.....
Contact No: Contact No:

11. Whether you have been convicted by the Courts for any offence? Yes/No
If yes, give details.

.....
.....

12. Applicant's Declaration:

I hereby certify that the information furnished by me in this application is true and correct. I am aware that if any of the information included here is found to be false or incorrect before selection, my application is subject to disqualification and if revealed after the receiving appointment. I am subject to dismissal from the service without any compensation.

.....
Applicant's Signature Date

NB: Copies of certificates should be enclosed to prove your qualifications and experience. If the space provided in the application is not sufficient to provide any information, please submit it as an attachment.

Certification by the Head of the Institute: (Applicable only for the applicants of Government/Semi Government/Corporations and Statutory Board)	
I do hereby declare that the applicant, Dr/Mr/Mrs/Miss	
is serving in the post of of the	
..... Institution/Department from	
on permanent/temporary/casual basis and he/she can be/cannot be released from the service, if	
he/she will be selected for the post applied.	
.....	
	Signature of the Head of the Institute/Department with official stamp
Date	:
Name of certifying officer:
Post	:
Address	:
