Post applying for	Annexure 1
	For office use

APPLICATION FORM

(For PS Category posts)

Application	for		th				post for
ofProjects, Ministry Of Tra					• • • • • • • •		101
1) Post applying for:							
(If applying for more the	nan one post, separate ap	plicati	on should	l be subm	nitted fo	or ea	ch post)
2) Name with Initials (In Sinhala)							
					මයා/	ම්ය/@	 මතෙව්ය
(In English / Blo	ock capital letters) Mr./	Mrs.	/ Miss:				
3) Names denoted by the (In Sinhala)	ne initials						
(In English / Block c	apital letters)			• • • • • • • • • • • • • • • • • • • •			
4) Nationality:							
5) Gender: Female / M	ale:	• • • • • • •					
6) National identity car	d No:						

7) Date of birth:									
8) Age: (As at applicat	ion				closing date))			
9) Residence det	ails:		Office o	letails:					
	Address								
10) Educational				Qualific	cations:				
11) Professional qualifications:	No Course Name		Degree/ P.G.De -Diploma/Diplo		Subject/ Relevant file	ed	Validity Da	ite	Universit Training institute
Profess	ional ephone No								
	Mobile No	_							
	E - Mail 03 Address								
	Address								
No			Validity	Institut	ion	Ν	IVQ level		
			Date						
	Telephone No	+							
	Fax No	+							
	E - Mail								
	qualification			I					
01	•								
02									
12) Relevant Trair	nings:								

Period

Relevant Field

Training Name

Institute

13) Experiences in Ro	oad Developn	nent Authori	ty:			
	Posit	ion	Responsib	ilities		No of Years
14) Details of previous releasement from the substantive pos	- if any					
Name of the Project / Institution	Position held	Time duration from-to	No of years	Rele	asement bas	sis
				Full time (with full -Pay)	Full time (with No -Pay)	Acting
15) Certificate / Let III.	ters regardir			tocopy)		

16) Certification of the Applicant

I certify that I have read the Notice regarding calling for application and fully understood all the details about for this application. There are no judicial proceedings against me and I certify that the information provided by me in this application it true and correct. I am aware that, I am not eligible to the post if the information I have provided is found to be incorrect and I have bound with the rules and regulation which are mentioned in 1/2019 Management Services Circular.

Date:	
	Signature of applicant

17) Recommendation of the Head of the Institution (Must be filled by the Head of Road Development Authority)

01.	I hereby certify that Mr./Mrs./Miss applicant) personal authority.							(Nam	e of the
	• PF Number								
	• Permanent Des	ignation							
	First Appointm	ent Date							
	• Confirmation D	ate							
	Applicant is of the applicant) ar intention to take di	nd no discip	olinar	y action				. (Substanti	-
03.									
	Name of the Project / Institution	Position held	Tim dura fron	ation	No of yea	ars	Relea	asement bas	is
							Full time (with full -Pay)	Full time (with No -Pay)	Acting

04. After considering above details and provisions No: 1/2019, He/ She could be released and a 2.3.3 (a) – Fulltime releasement with full pay b	greed to be released according to the Para
no pay leave basis/2.3.3 (c) – Acting releaser (Further releasement period) mentioned in sai selected to this post.	
Date:	
	Signature and seal of Head of the RDA

Also His/ her previous releasement details from the substantive post that are in above table

are confirmed with their personal files.