		Application No.						
		Call Up No.						
	Office Use Only							
	Age : GCE(O/L): Passed Not							
	Maths: A B C S W Sinha	ala : A B C S W						
	GCE(A/L): Passed Not Expe	rience Years Months						
	Qualified Not Overage No C	redit for English No Credit for Maths						
	No Credit for Sinhala	cates No required Experience						
	Other							
•	AIRPORT & AVIATION SERVICES (SRI LANKA) LIMITED BANDARANAIKE INTERNATIONAL AIRPORT, KATUNAYAKE  APPLICATION FOR THE POST OF ADMINISTRATIVE OFFICER (ON CONTRACT)							
	APPLICATION FOR THE POST OF ADM	INISTRATIVE OFFICER (ON CONTRACT)						
1	Title : Mr Mrs Mrs Miss							
	Last Name:							
	Initials with Last Name							
	Full Name as in : Single State							
	Other Names :							
2	NIC No:	Date of Issue:						
	Date Of Birth :	Date Month Year  Age as at 21/05/2019:						
	Date Month Year	year Month						
	Gender: Male Female Na	ationality:						
	Marital Status : Single Married	Divorced Widow						
3	Contact Details							
	Permanent Address :							
	City/Town:	Postal Code :						
	Telephone Numbers Home:	Mobile No:						
	Office : e-Mail:							
	District :	Province :						

·	Academic	Qualification	ns (Copi	es of	certific	cates sh	ould be attacl	ned)		
5		Subject		Grade		Index No			Year	
	Mathematics									
	English	thematics glish shala  G C E (A/L) (Copies of certificates should be attached)  dex No : Year :  Subject Grade Subject Grade  Professional Qualifications (Copies of certificates should be attached)								
	Sinhala		Grade   Index No   Year							
	G C E (A/L	(Copies of C	ertificat	es sh	ould b	e attach	<b>ed</b> )			
6	Index No :						Year :			
	Subject			Grade			Subject	Grade		
,	Profession	al Qualificat	tions (C	Copies	of cer	tificates	should be at	tached)		
7	Name of the			Per	riod		Field			
		Institution						-	Date	
			(dd/iiiii)	, , , , , ,	(dd/iii	'''/				

Highest Education Qualification

## **Employment History**

appointment.

Signature of the applicant: .....

;	(a) Present Post: (Copies Post				Institut	tion			Perio	d
							(	From dd/mm/y	ууу)	To (dd/mm/yyyy)
[	(b) Previous Employment (Copies of certificates should be attached)									
	Post		Institution			Per From d/mm/yyyy)	Period To (dd/mm/yyyy)		Total Service	
	Ex	tra-Curricular A	ctiviti	es:						
	Category		Туре		Achievement		Date/Year			
	Details of two non related referees:									
)	No. Name & Position				Official A	ss & Tele. Nos.	Residential Address & Tele. Nos.			

Date: .....