



University of Vocational Technology
University College of Kuliyaipitiya



APPLICATION FORM FOR ACADEMIC POSTS

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|---------------------------------|--|----------------------|----------------------|----------------------|----------------------|----------------------|
| POST: | | | | | | |
| NAME OF THE UNIVERSITY COLLEGE: | | | | | | |
| 01 | Full Name: | | | | | |
| 02 | Name with Initials: | | | | | |
| 03 | Permanent Address: | | | | | |
| | | | | | | |
| | | | | | | |
| 04 | Tel: | | Mobile: | | | |
| | Fax: | | E-mail: | | | |
| 05 | National Identity Card No: | | | | | |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 06 | Date of Birth: | | Year: | Month: | Day: | |
| 07 | Age as at Closing Date of Application: | | Years: | Months: | Days: | |
| 08 | Marital Status: | | | | | |
| 09 | Citizenship: | | | | | |
| 10 | Details of Secondary Education: | | | | | |
| | (i) G.C.E (O/L) | | | | | |
| | Name of School/ College | Year | Subjects | Results | Subjects | Results |
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| | (ii) G.C.E. (A/L) | | | | | |
| | Name of School/ College | Year | Subjects | Results | Subjects | Results |
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| 11 | Higher Educational Qualifications [First Degree and Postgraduate Degree (s)] | | | | | | | |
| | University / Institution | Degree | Class | Special/ Hons or General Degree | Core Subject/ Subjects | From-To | Effective Date of Degree | |
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| 12 | Professional Training | | | | | | | |
| | Institution | Training Program | Training Outcome | Period | | | | |
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| 14 | Certificates (if any) | | | | | | | |
| | Course/Certificate | Field | Name of the Institution/ University | Year | | | | |
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| 15 | Any other academic distinctions scholarships, medals, prizes: (indicate the Institution from which such awards have been obtained) | | | | | | | | |
| 16 | Publications: (Attach the list of research publications) | | | | | | | | |
| | Subject Relevancy: (Please Mark '✓' in the relevant cage) Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | | | | | |
| | Creativity (patents) | | | | | | | | |
| 17 | Current Employment: | | | | | | | | |
| | Post | Designation | Employer | Brief Description of Duties | From (dd/mm/yyyy) | | | | |
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| 18 | Previous Working Experience in Teaching/ Research/ Professional Work (in reverse order) | | | | | | | | |
| | Post | Designation | Institution | Brief Description of Duties | Period | | | | |
| | | | | | From (dd/mm /yyyy) | To (dd/mm /yyyy) | | | |
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| 19 | Proficiency in Languages (Please Mark '✓' in the relevant cage) | | | | | | | | |
| | | Written | | | | Spoken | | | |
| | Language | Very Good | Good | Satisfactory | Week | Very Good | Good | Satisfactory | Week |
| | Sinhala | | | | | | | | |
| | Tamil | | | | | | | | |
| | English | | | | | | | | |
| | Other | | | | | | | | |

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| 20 | Skills in Computing & Information Technology | | | |
| | Qualification | Institution | year | Skills acquired |
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| 21 | Leadership/ Management experience: | | | |
| 22 | Extra-Curricular Activities/ Community Services: | | | |
| 23 | Special Skills: | | | |
| 24 | Sports/ Awards/ Accolades: | | | |
| 25 | Are you under any obligatory National Service (If yes, specify): | | | |
| 26 | Minimum Notice Period: | | | |
| 27 | Names of two persons (with addresses and contact numbers) to whom reference can be made: | | | |
| | Name | Position and Address | | |
| | 1. | | | |
| | Tel. No: | Fax: | | |
| | E-mail: | | | |
| | 2. | | | |
| | Tel. No: | Fax: | | |
| | E-mail: | | | |
| 28 | I hereby declare that the particulars furnished by me in this application are true and accurate. I am also aware that if any particulars herein are found to be false or incorrect, I am liable to disqualification if the inaccuracy is discovered before the selection and dismissal without any compensation if the inaccuracy is discovered after the appointment. | | | |
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| | Signature of the Applicant | | Date | |

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| 29 | For Public / Corporate Sector Candidates |
| | <p>Application for the post of.....submitted by is forwarded herewith. If he/she is selected for the said post, he/ she can/ cannot be released.</p> <p>Date:</p> <p style="text-align: right;">Signature of the Head of Institution <i>(Please place the official seal of the Head of Institution)</i></p> |
| | Notes; |
| (i) | If the space above are not sufficient, please use extra sheets, when & where necessary. |
| (ii) | Indicate the list of documents attached with the application form. |
| | (a) |
| | (b) |
| | (c) |
| (iii) | Please mark with “---” in the relevant cage, if you have nothing to mention/ report. |