Specimen application

		For office use						
	ජාතික ලේඛනාරක්ෂක දෙපාර්තමේන්තුවේ අධීක්ෂණ කළම							
පුහුණු කිරීමේ ශේණිය සඳහා බඳවා ගැනීමේ සීමිත තරඟ විභාගය - 2023 (2024)								
Limited Competitive Examination for the Recruitment to the Post of Supervisory Management								
<u> 4</u>	Assistant Technical Services Category Training Grade of the Department of National Archives – 2023 (2024)							
	Department of National Archiv	nves – 2023 (2024)						
		ted post / posts :						
	Sinhala - 2 Selection	on Designation No:						
	Tamil - 3							
	English - 4							
	(Mention in the box.) (Put the nur Notice.)	numbers according to the Paragraph 02 of Examination						
01.	Eull name							
01.	Full name :(in English capital letters)							
02. Name with initials :Mr/Mrs./Miss								
	(In English block letters) Ex: RATHNAY	AYAKA, H.M.S.						
02	F 11							
03.	Full name:(In Sinhala)							
	(in similar)							
04.	Office Address (In English block letters): Admission card will be dispatched to this address.							
05.	Private Address (In Sinhala):							
06.	Sex: Female - 1 Male - 0							
	(Write the relevant number in the box.)							
	(me reter and resident in the contr.)							

07.	National Identity card Number:						
08.	Mobile Number :						
09.	Date of Birth:						
	Year:		Month:	Date :			
10.	G.C.E. (O/L)						
	10.1 G.C.E. (O/L)) – First sitting :	10.1 G.C.E. (O/L)) – First sitting :					
		Yea	ar:				
		Index Number:					
	Subject	Grade	Sı	ıbject	Grade		
	10.2 G.C.E. (O/L) - Second sitting:						
		Year:					
		Inc	lex Number :				
	Subject	Grade	S	'ubject	Grade		
11.	Details of current / previous posts l	neld:					
11.1 Earliest Post :							

11.2	2 Date of first Appointment	:					
11.3	Date of the confirmation of post:						
11.4	Current Position and Grade	:					
11.5	Date of Confirmation in curre	nt position:					
11.6	11.6 Details of the previous service period of the Department of National Archives:						
	Service Period	Designation	Place of work				
F	From To						
I							
II							
III							
information 	ou ever been convicted by a court	on a charge?	uring the period of service, please provide				
(Put the	() in the box) If yes, please proving	vide details.					
Yes	No						
	of the Examination fee Payment I						
	fice which the payment has done	-					
	eceipt Number and Date						
(iii) A	amount Paid	:					
		eceipt in this box a	affirmely. receipt with the applicant.)				

15. Certificate of the applicant:

- (a) I respectfully declare that the information provided by me in this application is true and correct. I agree to bear the consequences of not completing certain parts here and / or incorrectly completing them. I would also like to state that all the sections here have been completed correctly.
- (b) I also know that if this statement made by me proves to be false, I will be disqualified prior to appointment and subject to dismissal upon appointment.

(c)	I also declare that I am subjected to the rules and regulations imposed by the Commissioner				
	General of Examinations regarding the corresults.	nduct of the examination and the issuance of			
	resuits.				
(d)	I will not change any of the information mentioned here later.				
	Date: Sig	gnature of the applicant:			
16.	Certification of the applicant's signature:				
	•	ment and that he / she has earned all his / her salary			
	increments during the period preceding the date of (Except for warnings) that he / she has not been subjected to any disciplinary action and that he / she has fulfilled all the qualifications as per paragraph 5 of the notice and that he / she is eligible to appear for the examination as per the regulations mentioned in the relevant notice as per the personal file. I also certify that 600 Rupees of Examination fee has been paid and the receipt has been affixed in application and he / she placed the signature before me on				
	Date :	Signature of the certifying officer. Official Seal:			
	Name of the certifying officer :				
	Designation :				
	(Attest with Official Seal)				
	Recommendation and Certificate from the H	lead of Denartment			
		working in this department as			
		as earned all his / her salary increments during the			
		and that he / she has not been subjected to any			
		than warnings) during that period and that he / she			
		raph 5 of the notice and that he / she is eligible to			
		the regulations mentioned in the relevant notice as			
	per the personal file. I guarantee.				
	Date :				
		Signature of Head of the Department.			
		Official Seal :			