

UNIVERSITY OF COLOMBO INSTITUTE FOR AGRO-TECHNOLOGY AND RURAL SCIENCES (UCIARS) DEPARTMENT OF AGRO-TECHNOLOGY

APPLICATION FOR THE POST OF TEMPORARY DEMONSTRATOR

01.	Name	in	Full :							
F	Rev./Dr./Mr.	/Mrs./I	Miss (delete wh	chever is	s not applicable)					
02.	Name	with	n Initials	:						
03.	Permar	nent	Address	:						
7	`el:				Fax:			E-Mail:		
04. M	ailing Addr	ess:								
05.	Date of B	irth :								
06. A	06. Age as on Closing date of Applications : Year : Months : Days :									
07. Ci	vil Status :									
	itizenship :									
(State wheth	er by d	escent or by re	gistratior	n)					
09. Na	itional Ident	ity Card	l No :							

10.	Higher	Education	[(First	Degree ar	nd Postgraduate	Degree	(s)]

		University/Institution	From - To (with dates)	Degree (Class Obtained)	Number of Credits	Effective Dat	
10.1	First Degree						
10.2	Postgraduate Degrees					Main area of study	Effective date

(Transcripts should be attached)

1	1.	Any	other	professional	qualifications	/Dip	loma/	Higher	Diplo	ma/	'Certif	icate	Courses :

12. Details of Medals, Prizes & Scholarships etc. (During the Period in the University & Postgraduate Studies) (If space is not sufficient use separate sheet of the same size and evidence such awards needs to be attached to the end.)

13. Research and Publications

I.	Number of Research and Publications in refereed journals(Full paper published)	
II.	Number of peer reviewed Presentation with evidence at national/International Conferences/ Symposia	
	a. Published as full papers	(Evidence need to be attached to the end.)
	b. Published in abstracts form	
	c. Presented	14. Present Post and Institution
III.	Citation of the applicant's work by others in books and refereed journals	
IV.	Number of Books/ Book chapter in the relevant field.	
V.	Number of Monographs	
VI.	Others if any (please specify)	
	Date of Appointment:	
	Salary Scale:	
	Salary Step:	
	(State whether a Permanent Post or a Temporary / Contract Appointment)	

15.	Experience (state previous appointments with post held and duration) (If	
	space is not sufficient use separate sheet and attach to the end)	

Post	Institution	Duration

16.	Extra-Curricular	activities:
10.	Entra Garricaiai	activities.

(If space is not sufficient use separate sheet attach to the end)

17. Proficiency in Languages (Tick correct cage)

		Written					Spoken			
Language	Very Good	Good	Satisfactory	Normal	Weak	Very Good	Good	Satisfactory	Normal	Weak
Sinhala										
Tamil										
English										
Other										

18. Names and addresses of two non-related referees:						
(1)	(2)					
I hereby declare that the particulars furnished by me in the application are true and accurate. I am also aware that if any particulars contained 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.						
Signature of Applicant :	Date :					

Please attach photocopies of the relevant certificates and other Documents to the application.