MINISTRY OF URBAN DEVELOPMENT, CONSTRUCTION AND HOUSING China Aid Subsidized Housing Project for Low Income Category in Colombo Application for the Post of Name in Full (Please underline the 1. surname): 2. **Contact Details** i. Address (Office): ii. Address (Residence): iii. Telephone (Office): vi. Telephone (Res | Mobile): v. Fax: vi. Email (Personal): 3. **Current Employment:** i. Institution: ii. Position: iii. Appointment Date: National Identity Card | Passport 4. Number: 5. i. Gender: Male / Female Married/Unmarried/Widow/Separated ii. Civil Status: 6. i. Date of Birth: Date:......Year...... ii. Age as at closing date of applications: Date:.......MonthYear....

7.

State whether a citizen of Sri Lanka?

By descent / by registration

¹ Please clearly indicate the Post which you are applying for, otherwise the application will not be considered. If applying for multiple posts use separate applications

08.	Educational Qualifications:		Use a separate sheet if the space provided is inadequate		
	Degree	Year	Main Subject(s)	University Institution	
09.	Professional Qualifications:		Use a separate sheet if the space provided is inadequate		
	Qualification	Year	Institutio	on	Membership No.
10.	Experience:		Use a separate sheet if	the space prov	ided is inadequate
	i. Organization:		ii. Service Period:		

11.	Experience in handling similar type of projects:			
	Use a separate sheet if the space provided is inadequate			
12.	Contribution made to the relevant field			
	Use a separate sheet if the space provided is inadequate			
13.	Other Relevant Details (If any):			
	I hereby certify that the particulars furnished by me in this application are true and accurate. I'm aware that if any particulars contained in this application found to be false and incorrect, before selection, I'm liable to disqualify for the selection and if found subsequently to the appointment, I will be dismissed without any compensation.			
	and incorrect, before selection, I'm	liable to disqualify for the selection and if found		
	and incorrect, before selection, I'm	liable to disqualify for the selection and if found lead be dismissed without any compensation.		
14.	and incorrect, before selection, I'm subsequently to the appointment, I wil	liable to disqualify for the selection and if found libe dismissed without any compensation. Signature of the Applicant		
14.	and incorrect, before selection, I'm subsequently to the appointment, I wil Date: Attestation of the Applicant's Signature I hereby certify that	liable to disqualify for the selection and if found libe dismissed without any compensation. Signature of the Applicant		
14.	and incorrect, before selection, I'm subsequently to the appointment, I will Date: Attestation of the Applicant's Signate I hereby certify that	Signature of the Applicant ure: who applies for the post of the		
14.	and incorrect, before selection, I'm subsequently to the appointment, I will Date: Attestation of the Applicant's Signate I hereby certify that	Signature of the Applicant Who applies for the post of the most o		

	Address				
Attestation of the Head of the Department/Institution (To be filled only by the state sector applicants who submit their applications through respective organizations)					
15	I hereby recommend and forward the application of				
	Date:	Signature of the Head of the Department			
	(Official Seal)				