

# Development Lotteries Board

## Human Resources & Administrations Division

APPLICATION FOR THE POST OF .....

<b>1.Name with Initials</b>		<b>Mr./Mrs./Miss</b>
Name in Full		

<b>2.Postal Address</b>			
WhatsApp Number			
Contact Number			
Email ID			

<b>3.NIC Number</b>	
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<b>4.Date of Birth</b>	D	D	M	M	Y	Y	Y	Y
Age as at the closing date	Years		Months		Days			

<b>5.Civil Status</b>	<b>Married</b>		<b>Unmarried</b>	
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<b>6.Whether Citizen of SriLanka</b>	
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**7. Qualifications**

**a) Academic Qualification**

Institution	Qualifications	Date of Effective	Duration	
			From date	To date

**b) Memberships of Professional Bodies**

Name of Institute / Organization	Designation	Duration		Total Experience
		From date	To date	

**08. Work Experience**

Name of Institute / Organization	Designation	Duration		Total Experience
		From date	To date	

**09. Other Achievements**

Achievement	Year

**10. Names of two non-related referees with addresses and contact numbers**

<b>Name</b>	<b>Address</b>	<b>Designations</b>	<b>Voice</b>

**11. Have you been convicted of a criminal offence in a Court of Law? If so, give the details:**

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**12. Copies of the following certificates (not originals) should be attached:**

- a) Birth Certificate
- b) Certificates of Educational Qualifications
- c) Academic Transcript of Degree
- d) Certificates of Professional Qualifications
- e) Letters of Experience
- f) Copies of other achievement certificates

I do hereby certify that the particulars furnished by me in this application are true and accurate. I am also aware that, any particulars contained herein are found to be false or incorrect, I am liable to be disqualified before selection or to be dismissed without any compensation if such detection is made after appointment.

Date:.....

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**Signature of Applicant**

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**Certificate of Head of Department / Institution**

**(Only for the applicants serving in the Public service / Government Corporations/ Statutory Boards)**

**Chairman/CEO,**

**I recommended and forward the application of Mr/Mrs/Miss .....**

**..... Holding the post of .....  
in this institution. I certify that his / her work and conduct are satisfactory and that he/she  
not been subject to any disciplinary action. He /She can be released / cannot be released from  
service if selected this post.**

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**Date**

**Signature if Head of Department /  
Institution (Official stamp)**