

PARLIAMENT OF SRI LANKA

Specimen Application Form

	Post	of Parliament	tary Inter	preter	'(/	•••••	./	•••••	.)		
01.	(a)	Name with initials ((in Sinhala/T	amil):								
	(b)	Names denoted by initials (in Sinhala/Tamil):										
	(c)	Full Name (in block Capitals): Mr./Ms.										
02.		N.I.C							 			
03.	(a)	Private Address:										
								· · · · · · · · · · · · · · · · · · ·				
		Telephone No:										
	(b)	Official Address:										
		 Telephone No:								······		
		•]		
	(c)	Please indicate the a Private □	ddress the ad		to be post∈ fice	ed						
04.	(a)	Date of birth:attached)				e birth o	certifi	cate sh	ould	be		
	(b)	Age as at closing da	te for applica	tions: Ye	ears:	Mon	ths:		Days	s:		
05.	Civi	il Status: (Married/Unmarried)										
<i>06.</i>		der: (Male/Female)										
07.		e whether a citizen of		-								
08.	Edu	cational Qualification	s and Experie	ence: (Co	pies of the	certific	ates s	hould b	pe atti	ached)		
	For	those who are appl	lying under 3	3 (a) in t	the notice	2						
			Details o	of the D								
		Degree	Subjects		Univers	sity		Ye	ear			
	G. C. E (O/L)											
		Subject Pass				Yea	Year					
		English/ Tamil										
	Experience (Copies of the certificates should be attached)											
		Institute	Institute Post Servic			ice						

For those who are applying under 3 (b) in the notice

		G. C. E. (A/L)								
	Subject	Pass	Year							
	G. C. E (O/L)									
	Subject	Pass	Year							
	Tamil									
	English									
	Experience (Copies of the certificates should be attached)									
	Institution	Post	Service Period							
9.		tions (copies of the certificates shoul								
10.	Details of Present Employment: (a) Name and Address of the Institution: (b) Present Post:									
	(c) Date of First Appointment:									
	(f) Gross Salary:									
11.	Have you been convicted for a criminal offence by a Court of Law?									
12.	Have you served under the Government before?									
also at found	ware that, I am liable to	ticulars furnished by me in this applic be disqualified for this post if any p pefore selection, or to be dismissed wi nent.	particulars contained herein are							
Date:		 Signa	Signature of the Applicant							

Certification of Head of Department/Institution

(Only for applicants serving in the Public Service/Provincial Public Service)

Secretary-General of Parliament,	
I recommend and forward the application of Mr/Mrs/Miss	he/she has been he has not been inquiry. He/she
Signature of Head of Department/Ins (Official Stamp)	stitution
Date:	