

SAARC CULTURAL CENTRE (SCC)

No. 224, Bauddhaloka Mawatha, Colombo – 07, Sri Lanka

APPLICATION FORM

Name of the post:

INSTRUCTIONS: Please fill up the form completely and clearly. Type or print in ink. If needed, additional pages may be attached. Make sure that you sign the application and insert the date

1.	Name (As per certificate):						Affix Photograph	
2.	Date of Birth: Y: M: D:			Age				
	Place of Birth:							
	Citizenship at Birth:							
	Present Citizenship:							
3.	Contact Information		Residential Address					
			Official Address					
			Telephone Home: Office: Mobile:					
			E-mail address:					
4.	Sex (Check):	Male Female	Marital Status (Check):	Married	Single	Widowed	Divorced	Separated

5.	List of dependents(s)			
		Name	Date of Birth	Relationship
	01			
	02			
	03			
	04			

11	Employment Record: Starting with your present or most recent post, list in reverse order every employment during the last ten years and any significant experience not included in that period which you believe will be helpful in evaluating your record. Use a separate block for each post. Use additional sheets of paper as required.		
	Year	Career	Experience

12	Current Employment (Government Officials only).				
	Dates		Salaries per annum (Excl. Allowances)		Exact title of your post
			Starting	Present	
	From	To			
,.....,.....,.....,.....			
	Name of Supervisor				
	Name & address of Employer		Net Salary	Number & kind of employees supervised by you:	
				Professional staff: - Other supporting staff-	
	Description of your work:				

13	Previous Employment/s (Use separate box for each employment)				
	Dates	Salaries per annum (Excl. Allowances)			Exact title of your post
		Starting		Present	
	From	To			
,.....,.....,.....,.....			
	Name of Supervisor				

	Name & address of Employer	Net Salary	Number & kind of employees supervised by you:
			Professional - Other supporting staff-
	Description of your work:		

14	List of Professional publications & reports (Please attach separate sheets, if required):

15	List of Membership in professional bodies (please attach separate sheet, if required):
No	Descriptions
.	

19	State any other relevant facts. Include information regarding any residence or prolonged travel abroad, giving dates, areas, purposes, etc.

20	Please state any disabilities or any disease etc. which might limit you field of work (Final appointment will be subject to physical examination).

I certify that the statements made by me in the foregoing items are true, complete, and correct to the best of my knowledge and belief. I understand that any false statements or any required information withheld from this form may provide grounds for the withdrawal of any offer of appointment or dismissal.

Date: _____

Signature: _____

Your application for employment, if found useful to our overall programme, will be retained on our roster for a maximum period of 12 months.

Recommendation of the candidate's employer:

I do hereby certify that Professor/ Dr. /Mr. /Ms. /Mrs.....
.....

of the (Name of the Department/ Institute)
serving as a(Designation) will be released on deputation to join
the SAARC Cultural Centre (SCC), Colombo, Sri Lanka as per the stipulated date and terms if
he/she is appointed as (Designation at SCC).

Date:

Signature:

Name _____

Address _____

Official Stamp

Recommendation of the concerned Ministry:

I do hereby certify that Professor/ Dr. /Mr. /Ms. /Mrs.....
.....
.....

of the (Name of the Department/ Institute)
serving as a(Designation) will be released on deputation to join
the SAARC Cultural Centre (SCC), Colombo, Sri Lanka as per the stipulated date and terms if
he/she is appointed as (Designation at SCC).

Date:

Signature:.....

Name

Address

Official Stamp