

No

(For office use only)

Graduate

Diploma Holder

Application for Placement of unemployed Graduate and Diploma holders who Graduated before 01-01-2020

Personal Information

1. Full name :

2. NIC number :

3. Male: Female: (Pl mark "X" in the relevant box)

4. Telephone number :

5. E-mail address :

6. Date of Birth : (YYYY MM DD)

7. Address :

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8. District :

9. Divisional Secretariat : 10. Grama Niladhari's Division :

Educational Qualifications

11. Degree or Equivalent qualification in (Pl mark "X" in the relevant stream):

i. Graduate Diploma holder

ii. Related subject area

Arts Commerce Management Accountancy

Indigenous medicine Allied health science

Computing (IS/IT/CS/SE) Any others (specify)

12. valid from : (YYYY MM DD)

13. Internal : External: (Pl mark "X" in the relevant box)

14. Name of the university :

15. Country :

16. Subjects studied :

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17. The Ministry or Department where placement is expected:

(Indicate your choice in order of preference 1 to 11 from the list given below)

	Rural and Plantation Schools		Department of Survey
	Regional Irrigation Offices		Agricultural Farms and Extension Centers
	Agricultural Service Centers		Rural Minor Export Crops Offices
	Regional Wildlife Offices		Department of Valuation
	Indigenous Medicine Hospitals		Department of Immigration and Emigration
	Rural Hospitals / Dispensaries		

Declaration by the Applicant

I do hereby certify that the particulars given above are true and correct to the best of my knowledge and that I was not employed during the immediately preceding three year's period

I'm willing to be appointed to an above mentioned Rural / Plantation School or Hospital and to be engaged in field work

.....
Signature of applicant

.....
Date

Recommendation of Grama Niladhari

I hereby certify that the applicant herein has been unemployed for a period of over one year after graduation and that he / she is a permanent resident at the above address.

Name of Grama Niladhari : Division and Number:

Signature of Grama Niladhari : Date :
(Rubber stamp)

Recommendation of Divisional Secretary

I hereby countersign and certify that the details furnished by the Grama Niladhari are true and correct.

Signature of Divisional Secretary :

Divisional Secretariat :

Rubber stamp: Date :