

UNIVERSITY OF JAFFNA, SRI LANKA

Application form for the Post of Project Assistant cum Research Assistant – (On Contract) AHEAD Operation – World Bank Project Research Innovation and Commercialization (RIC) Project Faculty of Engineering

1. Name with initi	als (Mr/Mrs/Miss)
2. Name denoted	by initials
3. Permanent Add	
	1. Landline:
7. Date of Birth:	8. NIC No:
9. Gender:	
11. Age as at closing da	ate of application: Year: Month: Days:

a)	University Edu	cation (Deg	grees, Diploma,	etc.): (Please brir	ng the Origina	al certificates at
	University/ Higher Education Institute	Period	Course followed	Subjects	Class	Effective Date
	sional Qualifica			Original certifica l experience & ns	Year	rview)
	st Examination p			Tamil :		
	h .					
Englisl	1					

12. Nationality:

Inst	itution/Department	Post	Duration	
! -	s experience in Project ha	ndline.		
	bring the Original certif):	
Inst	itution/Project	Post	Duration	
sent	Occupation : (If applicable	e)		
sent	01. Post :			
	01. Post:	ent to such post :		
	01. Post:02. Date of appointme03. Whether confirme	ent to such post :ed in the present post :		
	01. Post: 02. Date of appointme 03. Whether confirme 04. Place of Work:	ent to such post :ed in the present post :		

17. Where a period of experience is a requirement for the post applied, state periods of such experiences: (Please

b. Previous appointments including those under training, if any, with dates:

Institution/Department	Post Salary Scale		Period (From - To)	

20. Any (her Particulars (If not enough this row, Please annex an attachment herewith)
21. Nam	and address of two referees (Non Relatives)
Nam	Address
1	
TP No : .	
TP No:.	
22. Dec	ration of Applicants:
I	ertify that all particulars stated by me in this application are true and correct, I am aware that if any
-	rticulars are found to be false or inaccurate prior to my selection, my application will be rejected and tha
	particulars are found to be false or inaccurate after my selection, I will be dismissed from service withou
а	y compensation.
Date	Signature of Applicant

NOTE: Applicants in the services of Government, Corporations or Statutory Boards should forward their				
applications through the head of the institution concerned.				
orwarded:				

U	warutu.						
	I certify that the particulars given in columns 01 to 21 of this application are correct according to tapplicant's personal file. He/ She could be released/could not be released from this institution if selected appointment.						
	Date Signature of Head of the Dep		tution				
		Rubber Stamp					