

SIR PONNAMBALAM RAMANATHAN FACULTY OF VISUAL AND PERFORMING ARTS UNIVERSITY OF JAFFNA, SRI LANKA

FORM OF APPLICATION FOR TEMPORARY POSITION

	POST:					
	DISCIPLINE :					
1.	Name in Full : (See note below)					
2.	Title: Rev./ Prof./ Dr./ Mr./ Mrs./Miss.					
3.	(a) Postal Address (Any changes should be communicated mediately)					
	(b) Contact No. :					
	(c) Telephone :					
	(d) Fax:					
	(e) E-mail Address:					
4.	(i) Date of Birth & Age:					
	(ii) National Identity Card No. :					
5.	Civil Status :					
6.	University Education (Degree, and Postgraduate Degree with Field of Specialization)	University Reg. No.	Duration of the Degree with dates	Results Class/Grade/GPA and Effective date)	Name of the University	

[•] If you were registered as a student in university under any other name please indicate such name within brackets.

/.	7. a) Present Occupation							
-	i. Designation :							
-	ii. Date of Appointment :							
iii. Dept. / Institution and its address : iv. Nature of Appointment: Permanent / Contract / Temporary / Casual /								
								-
	b. Basic Salary:							
	c. Allowance:							
		1						
	b) Previous appointments, if any with dates							
	Department / Institution	Post	Salary scale	D	Date			
			Ĭ					
			·	From	То			
			·	From	То			
				From	То			
			•	From	То			
				From	То			
				From	То			
8.	Name of Two persons (with Name Address	h address to whom referen		From	То			
8.	Name Address	h address to whom referen	nce can be made)		То			
8.	Name Address		nce can be made)		То			
8.	Name Address		nce can be made)		То			

	2				
9. I hereby certify that the particulars submitted by me in this application are true and accurate. I am aware if any of the particulars are found to be false or inaccurate, I am liable to be disqualified before selection and to be dismissed without any compensation if the inaccuracy is detected after appointment.					
	Date:				
	Signature of Applicant				
10. If the applicant is an employee in a Government / Corporation or Statuary Board this section should be filled by such Head of the Department / Institution.					
The applicant will / will not be released, if selected for appointment.					
Name:					
Designation:					
Date	Date :				

The paid Bank Slip for the deposit of a sum of Rs.100/- should be attached.