**Application for the Post of Work Assistant**
**Ministry of Youth and Sports**

1. Personal Information:

   a) Name with Initials at the end (In English Block Capitals)

   …….

   b) Name in Full (In English Block Capitals):

   …….

   c) Name in Full (In Sinhala / Tamil):

   …….

   d) Permanent Address (In Sinhala / Tamil):

   …….

   e) Permanent Address (In English Block Capitals):

   …….

   f) Gender: Male ☐ Female ☐ Others ☐

   g) Marital Status: ( Single / Married / Widowed / Divorced)

   ……...

   h) Ethnic Group: (Sinhala / Muslim / Berger / Malay)

   ……

   i) National Identity Card No: ……

   j) Date of Birth: Date …… Month …… Year …….……

   k) Telephone No: ……...….

   l) District: ……..

   m) Electorate Division: ……

   n) Grama Niladhari Division: …….

   o) Email Address: ……...

2. Educational Qualifications:

a) G.C.E (O/L) Examination: Year ..... Index No ……..……..

Subjects and Grades:

| No | Subject | Grade | No | Subject | Grade |
|---|---|---|---|---|---|
| 1. | | | 6. | | |
| 2. | | | 7. | | |
| 3. | | | 8. | | |
| 4. | | | 9. | | |
| 5. | | | 10. | | |

b) G.C.E (A/L) Examination: Year ..... Index No ……..……..

Subjects and Grades:

| No | Subject | Grade | No | Subject | Grade |
|---|---|---|---|---|---|
| 1. | | | 3. | | |
| 2. | | | 4. | | |

3. Professional Qualifications (Driving License Details, Experience etc.):

.....

.....

.....

.....

.....

4. Other Qualifications:

.....

.....

.....

.....

.....

5. Non-Related Referees:

1. Name / Address / Telephone:

.....

.....

.....

2. Name / Address / Telephone:

.....

.....

.....

6. Declaration of the Applicant:

I respectfully declare that the particulars furnished by me in this application are true and correct to the best of my knowledge. I agree to bear the loss which may occur due to incomplete and /or incorrect completion of any part of this application. Further, I state that, all sections of this application completed are true and correct to the best of my knowledge.

Date: …….…. Signature of Applicant: …….

7. Attestation:

I do hereby certify that Mr./Mrs./Miss ….…….……

…… is personally known to me and placed his/her signature in

my presence on …… .

Date ……  Signature of Certifying Officer ……

Name: ……

Designation: ……..

Address: ……