Application for appointing officers of Sri Lanka Administrative Service to the post of Additional District Secretary

Procedure for applying to the post

Order of preference as per the vacancy list (Enter the serial number)

_						
 1.Dis	strict	2. District	3. District	4. District	5. District	6. District
1. F	ost appl	ied for				
2. I	nformati	ion about the a	pplicant			
I.	Name in	n full (in Sinhala) ·			
	•••••	***************************************	************************	***************************************	• • • • • • • • • • • • • • • • • • • •	
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11.		• •		ERS in English)		
					• • • • • • • • • • • • • • • • • • • •	•••••
III.		l Identity Card N				
IV.	Age:		•••••	•••••••••••	•••••••••••••••••••••••••••••••••••••••	
V.	Present	resident address		•••••		
		****************	***************************************		***************************************	
VI.	Telepho	one numbers (Me	ention WhatsAp	p number as well):	
\ /II	Email address:					
VII.				••••••		
. Cui	rent ser	vice details				
I,				nistrative Service		
II.	Current	Grade:	•••••	······································		
III.	Date of	promotion to pr	esent grade:	•••••		
IV.	Present	Post:	•••••		•••••	******
V.	Date of	appointment to	present post:	***************************************		*****

VI.	Ministry related to the present post:
VII.	Department
VIII.	Telephone number of the service
	station
IX.	Fax number of the service
	station
۸	N.B. When entering information for the tables related to No. 4, 5 & 6 sections, you are required to number the documents mentioned to confirm the qualifications submitted by you and also mention the said numbers.
4. P	Prior Service details

4.1 Service details from the date of appointment to Sri Lanka Administrative Service

Post	Grade	Ministry/Depart ment/Institution		ration MM/DD)	A brief description regarding the nature of responsibility	Attachment Nos. (Compulsory)
			From	To		
		-				

5. Educational/Professional Qualifications Certified copies have to be attached)

5.1 Educational and Professional Qualifications

Post-graduate degrees/diplomas/certificate courses and professional qualifications	Field	University/Institute	(YYYY/MM/DD) if applicable only	Attachment number if applicable documents available to confirm (Compulsory)

5.2 Language proficiency (Language ability other than mother language)

Language Qualification Effective Date (YYYY/MM/DD)

Attachment Number (Compulsory)

	Language	Qualification	Effective Date (YYYY/MM/DD)	Number (Compulsory)	
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_	pecial achievements mention the certificates of commendations, productivity awards, are qualification here)				
	Special achievements/	Related ·	Attachment numb	* *	

Special achievements/ Certificates of Commendation/ Productivity Awards	Related . institution/individual offered	Attachment number if applicable documents available to confirm (Compulsory)
	<u> </u>	

	shed by me above is true and accurate to the best of my
knowledge.	
	······································
Date	Signature of the applicant

Attestation of the Head of Department

- (i) * I hereby certify that the particulars mentioned in this application are accurate as per the updated reports of the applicant's personal file; I declare that, presently, there is no pending disciplinary inquiry against the applicant; and, if the applicant is selected for this post, he/she can/cannot be released from the current post with/without replacement.*
- (ii) *I hereby certify that the particulars mentioned in this application are accurate as per the updated reports of the applicant's personal file, and if the applicant is selected for this post, he/she can/cannot be released from the current post with/without replacement. And, I further inform that a preliminary investigation is currently in progress/intended to be conducted in relation to the applicant, and the alleged activities of misconduct to which the complaints have been made against him/her are briefly mentioned as follows*.

(*Remove irrelevant words)

Number and date of the charge sheet	Specify disciplinary orders (if on-going)	Date of commencement of the punishment given.	Period to be excluded in calculating the satisfactory service period as per Public Service Commission Procedural Rules 186 (ii)

Date	Signature of the Head of Department
	Official Stamp