

POSTGRADUATE INSTITUTE OF SCIENCE University of Peradeniya

APPLICATION FOR THE POST OF SENIOR LECTURER - GRADE II (CONTRACT BASIS)

IMPORTANT: PLEASE FILL ALL THE BLANKS 1. 1, Name in Full: (underline Surname) (If registered as a student in a University/PG Institute under any other name, please indicate such name within brackets) Rev/Dr./Mr./Mrs./Miss 2. Name with Initials: 2. (a) Postal Address (Any change should be communicated immediately) (b) Contact Phone Numbers: Mobile: Residence: Office: (c) Email address : 3. Date of Birth & Age (Please attach copy of Birth Certificate) D D M M Y Y Y Y Age Y Y 4. Civil Status

registration, give reference number and date of certificate of citizenship)

(b) National Identity Card No:

(c) Passport No

5.

(a) Whether citizen of Sri Lanka (State whether by descent or by registration. If by

6.	Unive	rsity	Educ	ation
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(Degree, Diploma etc. <u>Please attach copies of all certificates</u>).

Degree/Diploma, etc & Name of University	From	То	Course followed	Date of Final Exam. & Results (Give Class/Grade, GPA)

7.	Postaraduate	Qualifications
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(State whether by course work or research, duration and effective date. <u>Please</u> attach copies of all relevant certificates).

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(Indicate the Institution from which such awards have been obtained / received. <u>Please attach</u> <u>copies of relevant certificates</u>).

^{8.} Academic Distinctions, Scholarships, Medals, Prizes etc.

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9. Research Publications, (Please attach proving documents)

(I) Books (If space is sufficient, please use a separate sheet)

No.	Name of the Book	Date of Publication	Author	ISBN No
i				
ii				
iii				

(II) Abstracts (If space is sufficient, please use a separate sheet)

No.	Title of Articles	Author	Source and date of the publication
i			
ii			
iii			

(III) Journals (If space is sufficient , please use a separate sheet)

No.	Title of Articles	Author	Source and year of publication
i			
ii			
iii			

Note: - First degree Dissertation/ Postgraduate Thesis are not considered as publication

10. Froliciency	in Language	es: Highest Exa	mination po	usseu III	
Sinhala:					
Tamil :					
English:					
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(b) Previous Employ Plo Designation	ease provide	copies of relevo	•		Reasons 1
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16. Names & addresses of two non-related referees:-

Names & addresses	Telephone No & e-mail
01	
02	

17. I hereby certify that the particulars submitted by me in this application are true and accurate. I am aware that if any of these 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

Note: -

1 Submit your application according to the format indicated in the web site www.pgis.lk

- 1. All applicants must complete the qualifications & experience by the closing date of the application. No qualification fulfilled after the closing date will be considered.
- 2. Applications not submitted according to this format and submitted without copies of required certificates to support qualifications & experience will be rejected.

(TO BE COMPLETED BY THE HEAD OF THE DEPARTMENT WHERE APPLICABLE)

Director

POSTGRADUATE INSTITUTE OF SCIENCE

The application is forwarded. Please note that if selected, action will be taken to release him/her from service.

Date: Signature of Head of Department

Date: Signature of Head of Institution

18 <u>Declaration by applicant if Head of the Institute has not completed the above</u> (If applicable)

If I selected for the position I am willing to resignation from the present position as my application has not come through the proper channel.

Date Signature of Applicant

Note: The candidates are required to send their academic transcripts in support of the application, in consultation with the authorities of the respective Universities where they studied. Their applications will not be considered in the absence of the academic transcript.

Assistant Registrar / Postgraduate Institute of Science