



Office use only

**UNIVERSITY OF PERADENIYA  
SRI LANKA**

**APPLICATION FOR THE POST OF .....**  
(Lecturer (Probationary), Lecturer (Unconfirmed)/ Senior Lecturer Grade II/ I)

**Faculty :- .....**

**Department :- ..... Disciplines of .....**

**IMPORTANT: PLEASE FILL ALL THE BLANKS**

**1. 1, Name in Full: (underline Surname)**

(If registered as a student in a University 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
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**Age**

Y	Y
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**4. Civil Status**

**5. (a) Whether citizen of Sri Lanka** (State whether by descent or by registration.  
If by registration, give reference number and date of certificate of citizenship)

**(b) National Identity Card No :**

**(c) Passport No**

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**6. University Education**

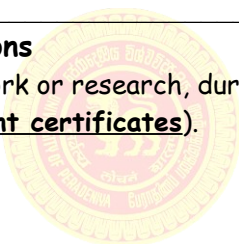
(Degree, Diploma etc. In the case of Medical/Dental, please give details of 2<sup>nd</sup>, 3<sup>rd</sup> and Final Exams. **Please attach copies of all certificates**).

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

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**7. Postgraduate Qualifications**

(State whether by course work or research, duration and effective date. **Please attach copies of all relevant certificates**).



**Board Certification : Yes/No (If yes, date)**

(MBBS/ BDS graduates only)

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**8. Academic Distinctions, Scholarships, Medals, Prizes etc.**

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

9. Research Publications, if any Attach a duplicate sheet indicating the same details (if space is insufficient, please use a separate sheet)

**(I) Books**

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

**(II) Abstracts**

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

**(III) Journals**

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

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

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**10. Proficiency in Languages: Highest Examination passed in**

Sinhala:

Tamil :

English :

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**11.(a) Present occupation & salary drawn (give details and period)**

**(b) Previous Employments, if any, with dates and periods, (In the case of Medical/ Dental/ Vet. Sci., please indicate the date of commencement of formal practice as a professional)**

Designation	Department/Institution	From	To	Reasons for Leaving

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**12. Commendations/Punishments, if any, during your career in the University / Educational Institution**

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**13. Have you ever been served with a Vacation of Post notice by any other University/ Government Institution? If so please provide details.**

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14. Have you ever been treated as a bond violator Yes

No

If yes, please provide details

Bond Value : .....

University/ Institute : .....

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15. Extra Curricular Activities (University, National & International level)

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16. Any other relevant particulars (not included above)

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17. Names & addresses of two non-related referees:-

Please Note that:-

Submitting of two non-related referees reports are compulsory. You can send referees reports either along with the application under sealed envelop

or

Referees may requested to send referees reports directly addressed to the Vice-Chancellor of this University indicating "Name of the applicant, post applied & the Department" at the top left hand corner of the envelope.

Names & addresses	Telephone No & e-mail
01	
02	

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17. I hereby certify that all the particulars submitted by me in this application are true and accurate. I am aware that if any of the information provided is found to be false or inaccurate, I am liable to be disqualified prior to selection or dismissed without compensation if the inaccuracy is discovered after appointment.

Date

Signature of Applicant

I hereby express my willingness to resign from the present position if I am not officially released to accept the post.

Date

Signature of Applicant

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Note : -

1. Submit your application according to the detailed requirements indicated on the University website [www.pdn.ac.lk](http://www.pdn.ac.lk)
1. All applicants must meet the required qualifications and experience by the closing date of the application. Qualifications obtained after the closing date will not be considered.
2. Applications that are not submitted according to the specified format, or that are submitted without copies of the required certificates supporting qualifications and experience will be rejected.

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

**Vice Chancellor**

**University of Peradeniya**

The application is hereby forwarded. Please note that if he/she is selected for the said post, he/she, can be/cannot be released from service.

Date:

Signature of Head of Department

Date:

Signature of Head of Institution

**Note: 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. Applications will not be considered in the absence of the academic transcript.**

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*Deputy Registrar / Academic Establishments, UPDN*

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