Office Use Only

Age : ☐   GCE(O/L) ☐   GCE (A/L) ☐ __

Relevant Course ☐   **Experience** ☐   **Qualified** ☐   **Not Q** ☐

Doubtful ☐   **Reason** ☐

AIRPORT & AVIATION SERVICES (SRI LANKA) (PRIVATE) LIMITED
BANDARANAIKE INTERNATIONAL AIRPORT, KATUNAYAKE

SPECIMEN APPLICATION FOR POST OF AIRCRAFT TECHNICIAN

1 Title : Mr ☐

Last Name: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Initials with Name ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Full Name as in NIC : ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

2 NIC No: ☐☐☐☐☐☐☐☐☐☐☐☐   Date of Issue: ☐☐ Date   ☐☐ Month   ☐☐☐☐ Year

Date of Birth : ☐☐ Date   ☐☐ Month   ☐☐☐☐ Year   Age as at 19/01/2026: ☐☐ Date   ☐☐ Month   ☐☐☐☐ Year

Gender: Male ☐   Nationality: ☐

Marital Status : Single ☐   Married ☐   Divorced ☐   Widow ☐

3 **Contact Details**

Permanent Address : _____
_____
_____

City/Town: _____   Postal Code : _____

Telephone No: _____   Mobile No: _____

e-Mail: _____   Province : _____

District : _____   Polling Division : _____

(Important – Further correspondent will be made to you via your Email address. Therefore, your email address should be mentioned correctly and legibly)

Academic Qualifications :

G C E (O/L) (Copies of Certificate Should be attached)

Index NO.

4	Subject	Grade	Subject	Grade

G C E (A/L)- (Copies of Certificate Should be attached)

Index NO.   :   Year   :

Subject	Grade

Technical Qualifications: Diploma/Certificate/NVQ
(Copies of Certificate should be attached)

5	Institute	Name of Course	Period (Date should be mentioned)	
			From	To

(a) Employment History
   Present Employment :

   (Copies of Service Certificates or the letter of appointment from the present Institution of employment including the full date Should be attached. In completed certificates will not be accepted.

6	Institute	Post	From /To (Date should be mentioned)		Total Service

b) Previous Employment (Copies of Service Certificates with the full date Should be attached)

Institute	Post	From /To (Date should be mentioned)		Total Service

Details of two non related referees:/

7	No.	Name & Position	Official Address & Tele. Nos.	Residential Address & Tele. Nos.
	………	………………………………………..	……………………………………..	……………………………………..
	……..	…………………………………….	……………………………………	……………………………………..

I do hereby certify that the above particulars given by me are true and correct to the best of my knowledge.

…………………………………………………………   ………………………
Signature of the applicant: Date: