

## Specimen Application Form

(For Office Use Only)

**Open Competitive Examination for Recruitment to the Post of Technical Officer  
(Civil) in the Supervisory Management Assistant Technical/Non-Technical Services  
Category of the Department of National Community Water Supply – 2026**

Medium of appearing for the Written Examination:

Sinhala - 1

Tamil - 2

English - 3

01. 1.1 Applicant's Name with Initials:- Mr./Mrs./Miss .....  
.....  
(In English Block Capitals) E.g.: Mr./Mrs./Miss. SILVA A.B.

1.2 Full Name : .....  
(In English Block Capitals) .....

1.3 Full Name :- .....  
(In Sinhala/Tamil) .....

02. 2.1 Permanent Address :- .....  
(In English Block Capitals) .....

2.2 Permanent Address :- .....  
(In Sinhala/Tamil) .....

03. 3.1 Date of Birth:-

Year : 

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 Month: 

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 Day : 

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3.2 Age as at the closing date of applications:- Years: ..... Months: ..... Days: .....

04. National Identity Card Number: 

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05. Gender: Male - 0 Female - 1 

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06. Civil Status: (Married - 1, Single - 2) 

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07. Telephone No.: 

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08. E-mail Address:- .....

09. Qualifications:-

9.1 Educational Qualifications:

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.....  
.....

9.2 Professional Qualifications:

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10. Have you ever been convicted of an offense before a court of law? .....

If convicted, provide details.

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.....

11. Details of the receipt for payment of examination fees:

- 11.1 Bank Branch where fee was paid :- .....
- 11.2 Receipt Number and Date :- .....
- 11.3 Amount Paid :- .....

Affix the receipt here so that it does not detach.

12. Certificate of Applicant:-

I certify that the information provided by me in this application is true and correct. I declare that I am aware that I am liable to be disqualified if any information mentioned herein is found to be false or inaccurate before selection for the post, and that I am liable to be dismissed from service without payment of any compensation if found after selection, and I further declare that I shall be bound by all rules and regulations.

Date :-

.....  
Signature of Applicant

13. Attestation of Applicant's Signature

I certify that ..... who presents this application is known to me personally and that he/she placed his/her signature in my presence on ....., and further certify that the prescribed examination fee has been paid and the relevant receipt has been duly affixed.

.....  
Signature of the Attesting Officer

- Date :- .....
- Full Name of the Attesting Officer :- .....
- Designation :- .....
- Address :- .....

(Confirm with official seal)

14. For those currently employed in the Public Service / Provincial Public Service. (Strike out unnecessary words)

I hereby certify that Mr./Mrs./Miss ..... mentioned above is employed at ..... (Institution), that the information provided by him/her is accurate, that his/her work and attendance are satisfactory, that there are no allegations against him/her, and that he/she can be released from the service of this institution if selected for this post.

Date: .....

.....  
Signature and Designation of the Head of Institution  
(Official Seal)