

Ministry of Agriculture and Plantation Industries  
Coconut Cultivation Board  
9/428 Denzil Kobbekaduwa Mawatha, Battaramulla  
(Tel. 0112861331)



(For Official use only)

**Specimen Application for Management Assistant (Technological) MA 2-3,**  
**MA 2-1 Coconut Cultivation Board**

Post Apply.....

1.1 Personal Information:

1.1 Name with Initials at the end in English Capital  
Letters.....

.....(Ex: SILWA A.B.K.)

1.2 Name in Full in English Capital Letters:

.....

1.3 Name in Full (In Sinhala / Tamil):

.....

1.4 Personal Address (In Sinhala / Tamil):

.....

1.5 Personal Address (In English Capital Letters):

.....

1.6 Gender: .....

1.7 Marital Status: .....

1.8 Ethnicity: .....

1.2 National Identity Card No.:-

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1.3 Date of Birth :- Year

Month

Date

1.4 Telephone No.:-

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1.5 District:.....

1.6 1.13 Electorate: .....

1.7 1.14 Grama Niladhari Division: .....

1.8 1.15 Email Address :- .....

## 2.0 Educational Qualifications

2.1 Ordinary Level Examination Year: ..... Index No : .....

	Subject	Result		Subject	Result
01.			06.		
02.			07.		
03.			08.		
04.			09.		
05.			10.		

2.2 Advance Level Examination

	Subject	Result
01.		
02.		
03.		
04.		

3.0 Higher Educational Qualifications (Technical Collage /Higher Educational Institute / Universities)

Technical Collage /Universities/Higher Educational Institute	Degree/Diploma/Higher Diploma	NVQ level	Effective Date	Result (Class)

4.0 Details regarding various Posts and Service Periods

	From			To			Name and Address of the Employer	Post Held	Service category post belong *
	Date	Month	Year	Date	Month	Year			
1									
2									

\*Employees service periods with Government Department/ Government Statutory institutes should be mentioned the Service category belong that the post held (E.g. Junior Managerial (JM), Management Assistant (technical) MA2-1/MA 2-3, Management Assistant (no technical) – MA 1-1)

**5.0 Professional Qualifications:**

Professional Qualifications	University / Institution	Professional Course	Effective date

**6.0 Other Qualifications:**

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**7.0 Details regarding two non-related Referees:**

Name / Telephone No.	Position	Address

8.0 . Certification of the Applicant:.....

I hereby certify that the information given above is true and correct.

Date :.....

.....

Signature of Applicant

9.0 Attestation:

I hereby certify that Mr. / Mrs. / Miss .....  
who submits this application is personally known to me and he / she placed his / her signature on  
..... in my presence.

Date: ..... Signature of the Attester  
Name: .....  
Position: .....  
Address: .....

9. Certification of the Head of the Department / Ministry if the applicant is an employee of the Central Government or the Provincial Government service:

I am forwarding the application of Mr. / Mrs. / Miss .....

I wish to inform that he / she is serving in this ministry / department as a permanent / temporary / trainee / casual officer and if he / she is selected for the above post he / she can / cannot be released. (Strike off unnecessary words)

.....  
Signature of the Head of the Institute/ Authorized Officer and the Official Stamp

Date:.....  
Name: .....  
Position: .....  
Ministry / Department/Statuary Boards, Cooperation Institutes: .....