

#### **UNIVERISTY OF RUHUNA**

# SRI LANKA

APPLICATION FOR THE POST OF	•••••
FACULTY :	
DEPARTMENT:	
IMPORTANT: PLEASE FILL ALL THE BLANKS	
1. (i). Name in Full:	
(ii) Name with initials:	
(iii) Gender: Female Male	
2. (i) Postal Address (Any change should be communicated immediately) :	
(ii) Contact Dhone Numbers	
(ii) Contact Phone Numbers:	
Mobile: Residence: Office:	
(iii) Email address:	
3. Date of Birth and Age:	
Age:	
4. Civil Status :	
5. (i) Whether citizen of Sri Lanka: By Descent By Registration	
(ii) National Identity Card No:	
(iii) Passport No:	
6. Education : Schools attended :	<del>.</del>
6. Education : Schools attended : (i) From	То
From	То

7. University Education: For non-medical grades applicants. (Please attach copies of all certificates).					
Degree and Name	From	То	Field of study	Give	Effective Date
of the University		10	Tield of Study	Class/Grade/GPA	
8. Subjects offered	for the first o	legree:			
(i)		5	(iii)		
(1)			()		
(ii)			(iv)		
\··/			(/		
9.State whether first	degree is a S	pecial Degree	or a General Deg	ree:	
10. For Medical	Grades only				
Special	Class	Disti	nctions N	1edals & Prizes	Other Remarks
Qualifications etc.					
2 <sup>nd</sup> MBBS					
Examination					
3 <sup>rd</sup> MBBS					
Examination					
Final MBBS					
Examination					
Board Certification :		s the offective	o dato):		
		s, the effectiv	e ualej	••••••	•••••
For Non-Medical and	Madical Con	daci			
	i iviedical Gra	iues:			

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

12. Academic Distinctions, Scholarships, Medals, Prizes etc. (Indicate the Institution from which such awards have been awarded.)					
av	Valus llave peell awai ucu.j				
13. (i	Research Publications: (If sp i) Books	ace is insufficient, ple	ease use a se	eparate sheet	)
No.	Name of the Book	Date of Publication	Author		ISBN No.
i.		Publication			
ii.					
iii.					
(i	ii) Abstracts	I			·
No.	Title of Articles	Author		Source and	date of publication
i.					•
ii.					
iii.					
		I			
(I No.	iii) Journals Title of Articles	Author		Source and	year of publication
i.					<u>, , , , , , , , , , , , , , , , , , , </u>
ii.					
iii.					
Noto	First Degree Dissertation/Pos	taraduato Thosis arou	not consider	od as publica	tions

Note: First Degree Dissertation/Postgraduate Thesis are not considered as publications. PLEASE CONSIDER THAT ALL RESEARCH PUBLICATIONS ARE CHECKED FOR FAKE JOURNALS.

14. Proficiency in Languages: Highest Examination passed in

Sinhala:

Tamil:

English:

15. (i) Present occupation & Salary drawn (give details and period)

## (ii) Previous Employments (if any, with dates and periods) – in the case of Medical/Dental/Veterinary Sciences, please indicate the date of commencement of formal practice as a professional)

Designation	Department/Institution	From	То	Reasons for leaving

16. Commendations/Punishments, if any during your career in the University/Educational Institution:

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

18. Extra Curricular Activities (University, Natio	nal & International level)
19. IT Qualifications obtained (which are equiv	alent to NVQ Level 4 or above)
20. Any other relevant particulars (not included	above):
21. Names and Addresses of two non-related re	
Name and addresses	eferees: Telephone No. & E-mail
Name and addresses	
Name and addresses	
Name and addresses 01.	
Name and addresses	
Name and addresses 01.	

- 22. In the event of being selected please indicate the latest date on which you would be able to assume duties:
- 23. Do you have close relatives in employment at University of Ruhuna. <u>If yes, please indicate favour</u> <u>accordingly</u>:

Name :	Relationship:
(i)	
(ii)	
(iii)	

24. 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:.....

<u>Note</u>: submit your application according to the detailed requirements indicated in the web site <u>www.ruh.ac.lk</u>. Please attach a scan copy of signed page of this (Page 6 only)

### TO BE COMPLETED BY THE HEAD OF THE DEPARTMENT WHERE APPLICABLE:

#### Vice Chancellor University of Ruhuna

The application is forwarded. Please note that if selected, action will be taken to release/not release him/her from service.

Date: ..... Signature of Head of the Department:..... (with Official frank)

Date: ..... Signature of Head of Institution: ..... (with Official frank)