

Specimen Application Form

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(For office use)

Recruitment to the post of Exercise Assistant in the Management Assistant Non-Technical Segment – 2 Service Category of the Department of Sports Development – 2026

01. Name in full (In English Block capitals):

(Eg: HEARATH MUDIYANSELAGE SAMAN RATHNAYAKE)

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02. Name with initials (In English Block capitals):

(Eg: H.M.S. RATHNAYAKE)

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.....

03. Name in full (In Sinhala):

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.....

04. Permanent Address (In English Block capitals):

.....
.....

05. Permanent Address (In Sinhala):

.....
.....

06. National Identity Card No.:

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07. Gender:

Male - 0

(Indicate the relevant number in the cage)

Female - 1

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08. Mobile Telephone No.:

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09. E-mail address:

10. Date of Birth:

Year:

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Month:

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Date:

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11. Age as at the closing date of applications:

Years:

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Months:

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Dates:

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12. Educational Qualifications:

(a) Particulars of G.C.E. (O/L) Examination: First attempt

Year:

Index No:

Subject	Grade	Subject	Grade

(b) Particulars of G.C.E. (A/L) Examination

Year:

Index No:

Subject	Grade

13. Additional Educational Qualifications:

Institute	Name of Course	Duration	Effective Date of the Certificate

14. Service Experience (particulars of previous service periods and institutions):

Service Period		Designation	Work Place
From	To		
I
II.
III.

15. Professional Qualifications:

Institute	Name of Course	Duration	Effective Date of the Certificate

16. Have you ever been convicted of any offence in a Court of Law?

(Indicate (√) in the relevant cage)

Indicate particulars, if the answer is yes.

Yes No

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17. Candidate's Certificate

I hereby declare that particulars furnished by me in this application are true to the best of my knowledge. I am aware that if any information furnished herein is found to be false, I am liable to disqualification before appointment and to dismissal from service without any compensation if the inaccuracy is detected after appointment. Further, I agree to be bound by the rules imposed by the Director General of Sports Development regarding the decisions on the results of the structured interview.

Date.....

.....
Signature of the Applicant

18. Attestation of Candidate's Signature: (Delete irrelevant words)

I hereby certify that Mr./Mrs./Miss.,
who has submitted this application, is personally known to me and placed his/ her signature before me on

.....
Signature and official stamp of the
officer attesting the signature

Date:

Name in full of the Officer, attesting the signature:

Designation:

Address:

Note: Applications shall be attested in accordance with Section (e) of Paragraph 07 of this Gazette notification.

19. Recommendation of Head of the Institution:

I hereby certify that Mr./Mrs./Miss, who has submitted this application, is serving in this Ministry/Department/Corporation/Board, and that he or she may / may not be released from the service of this institution if selected for the above post.

Date:

Signature and Official Frank of Head of Institution

Name of the Head of Institution:

Designation:

Address: