

(For Office use only)

Specimen Application

Open Competitive Examination for the Recruitment to the Post of Prison Guard - 2023)

	Town	Town No.
1 st Preference		
2 nd Preference		

(According to paragraph 02 of the Gazette Notification, please indicate the town in words which you intend to sit the examination and corresponding town number in figure)

Medium of language at the Examination

- Sinhala - 2 (Write appropriate number in the box)
Tamil - 3
English - 4 (This option is not allowed to change later)

01. (a) Name in full (In English block capitals) :

(b) Name with initials (Initials be written after the names) :

(in English block capitals) (EX. GUNAWARDHANA, M.G.B.S.K.)

(c) Name in full (in Sinhala/ Tamil) :

02.(a) Permanent Address (In English block capitals) (Admission Card will be sent to this address) :

(b) Permanent Address (in Sinhala/ Tamil) :

03. Sex (Female - 1, Male - 0 (Indicate the appropriate number in the box)

04. National Identity Card No. :

05. Telephone No. Mobile

Fixed

06. Marital Status :

Unmarried - 1 (Indicate the appropriate number in the box)

Married - 2

07. Date of Birth :

Year Month Date

08. Age as at the closing date of application (16.10.2023)

Years Months Days

09. Citizenship (by descent/ by registration) :

10. Physical measurement of the body

Height Feet : Inches :

Chest : Inches :

11. Educational Qualifications

G.C.E. (O/L)

(i) Year of the Examination :

(ii) Index No. :

(iii) Examination results :

G.C.E. (O/L)

(i) Year of the Examination :

(ii) Index No. :

(iii) Examination results :

Subject	Grade

Subject	Grade

12. Other Qualifications : :
13. If you have been convicted by a court of law for any offence, please indicate all information about such conviction :
14. Payment of examination fee :
- (i) Amount paid :
- (ii) Office at which the examination fee was paid :
- (iii) Date of payment :
- (iv) Receipt No. :

Affix an edge of the receipt.
 (If would be advisable to keep a photo copy of the receipt in your safe custody)

15. Certificate of the candidate :

I do hereby declare that the particulars furnished in this application are true and accurate to the best of my knowledge and belief and that the receipt containing No. dated in proof of the payment of examination fee is affixed herewith. I agree that I am bound to abide by the rules and regulations applicable to this examination and that the decision to be taken to cancel my candidature at any before the examination or at the time the examination is in progress or after the conclusion of the examination if it has been established that I am disqualified for the examination according to the criteria of this examination. I do further hereby declare that I am liable to be obliged to the rules and regulations imposed by the Commissioner General of Examinations pertaining to conducting of the examination and issuance of results.

Date :
 Signature of the Candidate

16. Attestation of the applicant's signature :- (Shall be as per 8.5 of the *Gazette* Notification)

I do hereby certify that Mr/ Mrs./ Miss who submits this application is personally known to me and that he/she his/her signature in my presence on and further that he/she has paid the prescribed examination fee and has affixed the receipt in the space provided in this application.

Name :
 Designation :
 Address :
 Date :
 (Please place the Official stamp in the attestation)

.....
 (Signature of the Officer attesting the signature of the candidate)

17. Certificate of the Head of the Department (This certificate is applicable only for the applicants already serving in the Public Service)

I do hereby certify that Mr/ Mrs./ Miss who is submitting this application is serving in this Department /institution and that his/her work and conduct is satisfactory and that he/she has fulfilled the qualifications necessary for applying for this post as per this notice and that he/she could be released/ could not be released from his/her present post if he/she will be selected for this post.

Name :
 Designation :
 Address :
 Date :
 (Please place the Official stamp in the Certification)

.....
 (Signature of the Head of the Department/ Institution)