

Specimen Application Form
Application form for the post of Senior Authorized Officer
(To be submitted through Deputy Controller (Ports))

01. Medium of Language sitting the examination :

Medium of Language	No.
Sinhala	2
Tamil	3
English	4

(Write the relevant number in the cage.)

- Fill the application in the same language to be sit the Examination.

02. Name in Full – in Sinhala/ Tamil (Mr. / Mrs. / Miss) :-

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03. Name in Full - in Block letters (Mr. / Mrs. /Miss)

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04. Date of Birth :- Age as on 31.12.2023

Years	Months	days

05. Private Address :-

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06. Highest Educational qualification obtained :-

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07. Date Joined the service as an Authorized Officer :-

- (i) Date of Confirmation as Authorized Officer :-
- (ii) Date of appointment to Grade I Authorized Officer and No. of the Letter of Promotion:-

- (iii) Active period of service in Grade I of Authorized Officer as at 31.12.2023 :-
 Years

(Active period of service means the period of service actually engage in service receiving the salaries pertaining to the post. All periods of no pay leave except the maternity leave approved by the Government are not counted for active period of service.)

08. Date of passing the prescribed Efficiency Bar Examination :-

09. Have you subjected to any disciplinary punishment other than warnings during the past succeeding 05 years as at 31.12.2023 ?

(A Disciplinary punishment shall have not been imposed in compliance of the provisions in Public Service Commission Circular No. 01/2020.)

10. Other :-

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• 11. Examination fees

11.1 Examination fees paid for sitting the examination : . Rs :

11.2 Receipt Number :

11.3 Date :

Receipt may be affixed here.
(It will be useful to retain a photocopy of the receipt.)

12. I declare that the above particulars are correct and he /she is entitled to sit the examination in the medium specified above and the receipt obtained paying the examination fee of Rs. has been affixed here. Furthermore, I declare that I agree with the rules and regulations imposed by the Director General of Sri Lanka Institute of Development Administration regarding conducting the examination and the releasing of results.

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Signature of the candidate

Date :

(The applicant shall place his / her signature in the presence of his/ her Head of the Department or an officer authorized to sign on behalf of the Head of the Department.)

13. Attestation of the signature of applicant

I certify that Mr. / Mrs. / Miss, the Authorized Officer of this Department and known to me personally placed his / her signature in my presence on and the receipt obtained paying the prescribed Examination fees has been affixed here.

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Signature of the officer attesting the signature

(Deputy Controller (Ports)/ Deputy Controller (Investigations)/ Assistant Controller (Ports))

Name :

Designation :

Address :

Date :

(Attest placing the official frank)

14. Certificate of the Head of the Department :

I certify that

1. the particulars provided above were scrutinized and
2. the officer is eligible to sit for this examination.

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Signature of Head of Department
and the official frank

Date :-