

Specimen Application

Application for the post of Senior Authorized Officer in the Department of Immigration and Emigration

(To be submitted by the Deputy Controller (Ports))

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(For office use)

01. 1.1 Name in Full (in English Block Capitals) :

.....
(Eg : HERATH MUDIYANSELAGE SAMAN KUMARA GUNAWARDHANA)

1.2 Name with last name first, followed by initials of other names (In English Block Capitals):

.....
(Eg : GUNAWARDHANA H. M. S. K.)

1.3 Name in Full:
(Sinhala / Tamil)

02. Gender :

Male - 0

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Female - 1

(Write the relevant number in the cage)

03. National Identity Card Number

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04. Mobile phone number

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05. Date of Birth :

06. Age as at the closing date of calling applications

Years

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Months

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Days

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07. Highest educational qualification obtained:

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08. Date of recruitment to the service as an Authorized Officer:

I. Temporary / Assistant Post:

II. Date of appointment to permanent post:

III. Permanent service period as at the closing date of calling applications:

IV. Service Period in the post of Authorized Officer Grade I: Years

V. Service period in the post of Authorized Officer Grade II: Years

VI. Active Service Period: Years

(Actual period of salaried service, excluding the periods of unpaid leave)

09. Date of passing the prescribed efficiency bar examination:

10. Has the Authorized Officer earned salary increments for 05 years in Grade I after being promoted to Authorized Officer Grade I?

11. Information on earning salary increments

Salary increment date	Salary increment earned / not earned

12. Performance Evaluation Levels

Year	Evaluation Level (Unsatisfactory, Satisfactory, Above Average, Excellent)

13. Have you faced any disciplinary action, excluding admonitions, within the five years preceding the closing date of applications?.....

(Should have not been subject to a disciplinary punishment as per the provisions set out in Public Service Commission Circular No. 01/2020)

14. Others

15. I declare that the above particulars are true and correct.

Date :

.....
Signature of the Candidate

16. To be completed by the Head of Department.

Secretary,

Ministry of Public Security and Parliamentary Affairs.

The information given in the application submitted by Mr. / Mrs. is correct / incorrect as per the information in the personal file. I hereby declare that no disciplinary action has been taken against him/her and that no such action is proposed to be taken in the future and that he / she has / has not earned all the salary increments for the preceding 05 years in the Authorized Officer Grade I as at the closing date of calling applications. I do / do not recommend his / her application.

Date:

.....
Signature of the Head of Department
Designation and Official Seal

17. To be completed by the Secretary of the Ministry.

Secretary,
Public Service Commission,

I agree / disagree with the recommendations of the Head of Department / Institution regarding the performance of duties and conduct of Mr. / Mrs., Authorized Officer Grade I.

Date:

.....
Secretary,
..... Ministry
Official Seal