SPECIMEN APPLICATION FORM

RECRUITMENT TO THE POST OF ..... IN THE MANAGEMENT ASSISTANT NON-TECHNICAL - SEGMENT 2 SERVICE CATEGORY OF THE DEPARTMENT OF NATIONAL MUSEUMS - 2026

(For Office Use Only)

1.0

1.1 **Name with Initials:** (In English capital letters with initials at the end) *e.g.:* PERERA A.B.C
.....
.....

1.2 Full Name:
(In English capital letters)
.....
.....

1.2 **FullName:**(InSinhala/Tamil).....
.....

1.3 **National Identity Card (NIC) Number** :

1.4 Date of birth :

Year: Month: Date:

1.5 **Age as at the closing date for submitting applications**:

Years: Months: Days:

1.6 gender : (male- M, female - F)

1.7 Marital status : Married : Single :
(Put a tick √)

2.0 Permanent Address:

2.1 In English Capital Letters: .....
.....

2.2 In Sinhala/Tamil: .....
.....

2.3 Address to which calling letters should be sent: .....
.....

3.0 Permanent Residence Details:

3.1 Provincial Council: .....

3.2 District: .....

4.0 Telephone Number:

Landline: .....

Mobile: .....

5.0 Educational Qualifications:

1. G.C.E. (Ordinary Level)

- **Year:** .....
- **Index Number:** .....

Subject Passed	*Grade Obtained*

2. **G.C.E. (Advanced Level)**

- **Year:** .....
- **Index Number:** .....

Subject Passed	*Grade Obtained*

(Certified copies of certificates confirming educational qualifications should be sent along with the application)

6.0 Professional Qualifications:

Course Followed	*institution*	*Professional Level Obtained*	*Date of Course Completion*

7.0 experience :

Workplace	*Designation*	*Service period*	
		from	*to*
1.			
2.			
3.			
4.			

8.0 Have you ever been convicted of an offense by a court of law
(put a tick √)

yes ☐ no ☐

8.1 If "Yes", provide details : .....
.....

9.0 Applicant's Certification:

(a) I hereby declare that the information provided by me in this application is, to the best of my knowledge, true and correct.

(b) I am aware that if any statement made by me is proven to be false, I will be disqualified for recruitment, and if proven so after receiving the appointment, I am liable to be dismissed from service.

(c) Furthermore, I declare that I shall abide by the rules and regulations laid down by the Director General of National Museums regarding the conduct of the eligibility assessment interview.

(d) I shall not alter any information stated herein at a later date.

.....,
Signature of Applicant.

Date : .....

10.0 Attestation of Applicant's Signature:

I certify that ..... who is submitting this application is personally known to me, and that he/she signed under paragraph 9.0 above in my presence on ..... .

.....
Signature of Attester

Date: .....
Name of Attester: .....
Designation: .....
Address: .....
(Confirm with official seal)