



RAJARATA UNIVERSITY OF SRI LANKA

FORM OF APPLICATION FOR THE POST OF PROFESSOR

POST APPLIED FOR : Professor

SPECIALTY :

01. PERSONAL DETAILS

(If registered as a student in a University under any name, please indicate such name within bracket)

Surname:		Other Names:			
Date of Birth (attach certificate)					
Title:	Professor	Citizen of Sri Lanka	Yes		
	Rev.		No		
	Dr.	Sex	Male		
	Mr.		Female		
	Ms.	Civil Status	Single		
	Married				
Professional Summary		Degrees (Eg. B.Sc. Hons Cey., M.Sc. Land.)			
		Titles of theses written			

02. **Address (Any changes should be communicated immediately. An e-mail address is strongly encouraged)**

Postal:	Tele :
	Fax :
	E-mail :

03. **Academic and Professional Qualifications:**

Degree/ Qualification	University/ Institution	Years attended	Subject/ Specialty

04. **Proficiency on Languages: Highest Examination passess in,**

Sinhalese -
Tamil -
English -
Other -

05. (a) **Present occupation and salary drawn** :
Previous Employment, if any, with
(b) **dates and periods (begin from the last)** :

06. **Commendations of any, during your career**
(a) **As a University student** :
(b) **At work** :

07. **Punishments/ Disciplinary actions** :

08. **Extra- Curricular Activities** :

09. **Research Interest** :

10. **Vision Statement** :

11. **Any other relevant particulars (Not included above)** :

12. **Two Professional References** :

13. **Declaration**

I hereby certify that the particulars submitted by me in this application are true and accurate. I am aware that if any of these particulars are found to be false or inaccurate, I am liable to be disqualified before selection and to be dismissed without any compensation if the inaccuracy is detected after appointment

Date:

.....
Signature of Applicant

TO BE COMPLETED BY THE HEAD OF THE INSTITUTION WHERE APPLICABLE

Vice Chancellor
The Rajarata University of Sri Lanka,
Mihintale

This application is forwarded. Please note that if selected, action will be taken to release the candidate from service.

Date:
(with appropriate internal routing)

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Signature of Head of the Institution