

Index No.	
(For office use	only)

Open Competitive Examination for Recruitment of Audit Examiners to Grade II of the Audit Examiners' Service – 2018

		form to be prepared in two A4 size papers as No. 01-04 in first page, No. 05-page, No. 07 to 09 in third page and remainder in fourth page)				
Town	and To	own No.in which you intend to sit the examination: Town TownNumber				
JAFFN		1				
Langu	iage M	edium of Examination:				
Tamil Englis	sh - 4	indicate the relevant number in the cage) nedium will not be allowed to change subsequently)				
01.		ull Name: (in English block capitals)nple: HERATH MUDIYANSELAGE SAMAN KUMARA GUNAWARDHANA)				
	1.2 N	1.2 Name with Initial indicating the initial after last name:(in English blockcapitals)				
	(Exai	mple: GUNAWARDHANA, H.M.S.K)				
	1.3 F	ull Name: (in Sinhala/Tamil)				
02.		ess: ermanent Address: (which Admission Card to be posted) (in English block capitals)				
	2.3 O (An o	ermanent Address: (in Sinhala/Tamil)				
03.	3.1	Sex (Female - 1 Male – 0) (Indicate the relevant number in the cage)				
	3.2	National Identity Card No.:				
	3.3 (India	Civil Status (Married -2 Single -1) cate the relevant number in the cage)				
	3.4	Date of Birth: Year Month Date				
	3.5	Age as at 13.06.2018:				
		Years Months Days				
	3.6	Mobile Phone No				

04.		e the relevant number -1, Tamil -2, Indian		m -4, Other -5		
05.(i)	Qualific	cations you have obta	ined to sit for th	nis examination.		
	fications ained	Date of obtaining qualification	Subjects	Date of Issuing resul	Institution from which the qualification was obtained	
(ii)	Subject	s passed at the G.C.E	. (O/L) Examin	ation.		
	(a) Yea	r of Examination	(b) Index Number	· · · · · · · · · · · · · · · · · · ·	
		Subjects	Pass obta	ined		
06.	Extra educational and professional qualifications:					
07.	Names and addresses of two referees nominated by the candidate to certify his/ her character and capacity					
	(i)					
	(ii)					
08.	O8. Candidates who sit for this Examination while serving in the Public / Provincial Public Service should fill the following. (i) The Service / Departmental Grade you belong to:					
	(ii)	Date of confirmation	in the Service /	Departmental C	Grade:	
		Yes	ar	Month	Date	

09.	The cash receipt should be affixed on the application firmly:					
	(i)	Number of the Receipt:	(ii)	Place of Payment:		
	(iii)	Date of Payment:	(iv)	Amount Paid (Rupees)		
10.	(Keeping a photocopy of the cash receipt with you would be helpful) Certificate by Candidate:					
	I declare that to the best of my knowledge and belief the information given here is true and that I have attached the receipt bearing No					
Date :				Signature of Candidate		
11.	Attest	ation: (Refer Paragraph 07(f) o	f the Gazette	notification)		
	applic			who forward this his/her signature in my presence		
D .			Signat	ure and Seal of the Attester		
Full N Design	nation:	the Attester:				
12.	Certif	icate of the Head of the Instituti	on:			
	(For candidates competing in the open competitive examination and who are already in Public Service/ Provincial Public Service)					
	this or satisfa above be / ne	ffice fromactory and I personally checked with the records available in t	and his/ her all the inform his office and post, if select	work, attendance and conduct is ation furnished in cages 01 to 08 found correct and he/ she could ed for this appointment and he 8.		
			Signat	ure and Seal of the Head of the tion or the Authorized Officer		
	ame of	 the Attester:				