



For office use only

Specimen Application Form

Application for the post of of the
Land Reform Commission.

1. Personal Information:

1.1. Name with Initials: (in block capital letters with initials at the end), e.g.: PERERA A. B. C.
.....

1.2. Full Name: (in block capital letters)
.....
.....

1.3. Contact Details:

1.3.1. Permanent Residential Address:
.....
.....
.....

1.3.2. Contact Details:

Mobile: Fixed:
WhatsApp:

1.3.3. Email Address:

1.4. NIC Number:

1.5. Date of Birth: 1.6. Age:
(As at 06.11.2026)

1.7. Gender (Male / Female):

1.8. Nationality:

2. **Academic Qualifications:** *(Attach copies of certificates with transcripts)*

Name of the University	Degree	Class of Degree	Effective Date	Subjects
1.				
2.				
3.				
4.				

3. **Postgraduate Qualifications:** *(Attach copies of certificates with transcripts)*

Name of the University	Postgraduate Degree	Effective Date	Duration	Subjects
1.				
2.				
3.				
4.				

4. **Professional Qualifications, Memberships & Fellowships, etc.:**

(Attach copies of certificates with transcripts)

Institution	Qualification Obtained	Effective Date	Duration
1.			
2.			
3.			
4.			

5. **Experience:** *(Attach copies of service certificates)*

Institution	Position	Period <i>(from -to)</i>	No. of Years
1.			
2.			
3.			
4.			

6. Name of two other non-related referees:

Name	Designation	Address	Contact No. & E-mail
1.			
2.			

7. Applicant's Declaration / Certification:

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 the appointment.

.....
Date

.....
Signature of the Applicant

8. Recommendation of the Head of the Institution:

(For officers confirmed in Public Service/ Provincial Public Service including Local Authorities/ Public Corporations/ Statutory Boards and Fully State-Owned Companies)

I certify that the above-mentioned Mr./Mrs./Miss, is serving at the Ministry/ Department/ Institute of and that the information furnished by him/ her is accurate, that work and attendance are satisfactory, that no allegations have been levelled against him/ her, and that if he/ she is selected for the post, he/ she can be released from the service of this Institution.

.....
Date

.....
Signature of Head of Department
(Place the official stamp)