

University of Ruhuna – Application Form

Post: Temporary Demonstrator

1. Department of choice

i.

III.

ii.

IV.

2. Name in full: Mr. /Mrs. /Miss

3. Home address:

4. Telephone No:

5. Date of Birth:

6. National I.D. No.:

7. Civil Status:

8. Previous appointments if any with dates:

i. Post:

ii. Address:

9. Educational Qualifications:

i. University Education/Faculty

Examination	Year	Results	Attempt	Distinction/Awards etc.

10. English Language proficiency:

11. Whether you have faced disciplinary inquiry and been punished?

12. Willingness to participate in all student, Faculty & University functions:

13. Vision that you have for the benefit/development of the Faculty:

I hereby certify that the particulars submitted by me in this application are true and accurate.

Date

Signature of Applicant

For office use only

Recommendation of Head of Department:

Signature of Head of Department:

Date:

Department

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Recommendation of the Dean

Signature of Dean

Date:

Faculty:

Appointment approved/not approved

Vice Chancellor

Date