

DEPARTMENT OF MOTOR TRAFFIC
VEHICULAR EMISSION TESTING PROGRAMME UNIT
APPLICATION FORM FOR RECRUITMENT TO VACANT POSITIONS
Post Applied For: _____

01. Name

1.1 Name with initials at the end (in English CAPITAL letters): _____

1.2 Gender: Male / Female _____

1.3 Full Name (in English CAPITAL letters): _____

1.4 Full Name (in Sinhala/Tamil): _____

1.5 National Identity Card No.: _____

02. Permanent Address (in English CAPITAL letters): _____

03. Date of Birth: Year: _____ Month: _____ Day: _____

04. Marital Status: Married / Unmarried

05. WhatsApp No.: _____

Mobile Telephone No.: _____

Email Address: _____

06. Educational Qualifications

Please list your educational qualifications, starting with the highest qualification obtained.

Degree / Postgraduate Degree	Year	Institution	Special / General

07. Details of Other Professional Qualifications

Professional Qualification	Issuing Institution	Details of Subjects / Field

08. Details of Other Skills

Place a ✓ mark in the relevant box.

Skill	Very Good	Good	Average	Poor
English Language Proficiency				
Sinhala Language Proficiency				
MS Office Literacy				
Computer Literacy				
Ability to use Artificial Intelligence for work-related tasks				
Statistical Software Literacy				

09. Details of Experience Relevant to the Post

1. _____

2. _____

3. _____

10. Details of Institutions Served and Employment

No.	Institution	Period of Service	Duties / Functions Performed
1			
2			
3			
4			

11. Applicant's Declaration

I hereby respectfully declare that the information furnished by me in this application is true and correct to the best of my knowledge. I agree to accept responsibility for any loss that may arise due to any section of this application being left incomplete and/or incorrectly completed. I further declare that all sections of this application have been completed to the best of my knowledge.

I undertake not to alter any of the information stated herein subsequently.

Date: _____

Signature of Applicant: _____

12. Certification of Signature

I certify that Mr./Mrs./Miss _____, who is submitting this application, is personally known to me and that he/she placed his/her specimen signature before me on _____.

Signature of Certifying Officer: _____

Date: _____

Full Name of Certifying Officer: _____

Designation: _____

Address: _____

(To be certified with the official seal.)

13. Certification by Head of Department / Ministry

This is to certify that the applicant, Mr./Mrs./Miss _____, is presently serving as a permanent employee of this Ministry/Department in the position of _____. If selected for this post, he/she can / cannot be released from his/her present service on secondment / no-pay leave.

Signature and Official Seal of Head of Institution: _____

Name: _____

Designation: _____

Address: _____

Date: _____

**VEHICLE EMISSION TESTING PROGRAMME OFFICE
DEPARTMENT OF MOTOR TRAFFIC
RECRUITMENT FOR VACANT POSITIONS**

Post Applied For:

01. Name

1.1 Name with initials at the end (in CAPITAL letters):

.....

1.2 Gender:

☐ Male ☐ Female

1.3 Full Name (in CAPITAL letters):

.....

1.4 Full Name (in Sinhala/Tamil):

.....

1.5 National Identity Card No.:

.....

02. Permanent Address

(in CAPITAL letters)

.....

03. Date of Birth

Year: **Month:** **Day:**

04. Marital Status

☐ Married ☐ Unmarried

05. Contact Details

WhatsApp No.:

Mobile Telephone No.:

Email Address:

06. Details of Educational Qualifications

G.C.E. (Ordinary Level) Examination

Examination Year:

Examination Index No.:

No.	Subject	Year	Result
01			
02			
03			
04			
05			
06			
07			
08			

G.C.E. (Advanced Level) Examination

Examination Year:

Examination Index No.:

No.	Subject	Year	Result
01			
02			
03			
04			

07. Details of Professional Qualifications in Computer Literacy

Professional Qualification / Course	Issuing Institution	Details of Subjects

Professional Qualification / Course	Issuing Institution	Details of Subjects

08. Details of Other Skills

Place a ✓ mark in the relevant box.

Skill	Very Good	Good	Average	Poor
English Language Proficiency	☐	☐	☐	☐
Sinhala Language Proficiency	☐	☐	☐	☐
Advanced MS Excel Proficiency	☐	☐	☐	☐
Ability to Use Artificial Intelligence (AI)	☐	☐	☐	☐

09. Details of Institutions Served and Employment

No.	Institution	Period of Service	Duties / Functions Performed
1			
2			

10. Applicant's Declaration

(a) I hereby solemnly declare that the information furnished by me in this application is true and correct to the best of my knowledge. I agree to bear any consequences that may arise due to any section of this application being incomplete and/or incorrectly completed. I further declare that all sections of this application have been completed to the best of my knowledge.

(b) I will not subsequently alter any information stated herein.

Date:

Signature of Applicant:

The declaration and signature fields are based directly on the source form.

11. Certification of Signature

I hereby certify that **Mr./Mrs./Miss**, who has submitted this application, is personally known to me and that his/her specimen signature was placed before me on

Signature of Certifying Officer:

.....

Date:

Full Name of Certifying Officer:

.....

.....

Designation:

.....

Address:

.....

(To be certified with the official seal.)

12. Certification by the Head of Department / Ministry

I hereby certify that the applicant, **Mr./Mrs./Miss**, is presently serving as a permanent employee of this Ministry/Department in the position of and that, if he/she is selected for this post, he/she **can** / **cannot** be released from his/her present service on a **secondment** / **no-pay leave basis**.

Signature and Official Seal of Head of Institution:

.....

Name:

Designation:

Address:

Date: