



UNIVERSITY OF RUHUNA

SRI LANKA

**APPLICATION FOR THE POST OF DIRECTOR/CENTRE FOR QUALITY ASSURANCE**

**(FULL TIME/PART TIME)**

**IMPORTANT: PLEASE FILL ALL THE BLANKS**

1. (i). Name in Full:

(ii) Name with initials:

(iii) Gender:

Female

Male

2. Whether you applied for the post on a full-time basis or part-time basis:

Full- time

Part-time

3. (i) Postal Address (Any change should be communicated immediately) :

(ii) Contact Phone Numbers:

Mobile:

Residence:

Office:

(iii) Email address:

4. Date of Birth and Age:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Age:

Y	Y
---	---

5. Civil Status :

6. (i) Whether citizen of Sri Lanka:

By

Descent

By Registration

(ii) National Identity Card No:

(iii) Passport No:

**7. University Education: (Please attach copies of all certificates).**

<b>Degree and Name of the University</b>	<b>From</b>	<b>To</b>	<b>Field of study</b>		<b>Effective Date of the Degree</b>

**8. Postgraduate Qualifications: (State whether by course work or research, duration and effective date. Please attach copies of all relevant certificates)**

**9. Academic Distinctions, Scholarships, Medals, Prizes etc. (Indicate the Institution from which such awards have been awarded.)**

**10. Professional qualifications obtained (for the post of Director/CQA)**

**11. Service Experience in the field of University Quality Assurance Systems:**

**12. Research Publications: (If space is insufficient, please use ATTACHEMENT 1)**

**(i) Books**

No.	Name of the Book	Date of Publication	Author	ISBN No.
i.				
ii.				
iii.				

- **PLEASE CONSIDER THAT ALL RESEARCH PUBLICATIONS ARE CHECKED FOR FAKE JOURNALS.**

**(ii) Abstracts**

No.	Title of Articles	Author	Source and date of publication
i.			
ii.			
iii.			

**(iii) Journals**

No.	Title of Articles	Author	Source and year of publication
i.			
ii.			
iii.			

**13. Proficiency in Languages: Highest Examination passed in**

Sinhala:

Tamil:

English:

**14. (i) Present occupation & Salary drawn (give details and period)**

**(ii) Previous Employments (if any, with dates and periods) – in the case of Medical/Dental/Veterinary Sciences, please indicate the date of commencement of formal practice as a professional)**

Designation	Department/Institution	From	To	Reasons for leaving

**15. Commendations/Punishments, if any during your career in the University/Educational Institution:**

**16. Extra-Curricular Activities (University, National & International level)**

**17. Any other relevant particulars (not included above):**

**Note : Please submit your CV and personal statement along with the application**

**18. Names and Addresses of two non-related referees:**

Name and addresses	Telephone No. & E-mail
01.	
02.	

**19. In the event of being selected please indicate the latest date on which you would be able to assume duties:**

20. Do you have close relatives in employment at University of Ruhuna. **If yes, please indicate favour accordingly:**

<b>Name :</b>	<b>Relationship:</b>
(i)	
(ii)	
(iii)	

21. 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:.....

**Note:** submit your application according to the detailed requirements indicated in the web site [www.ruh.ac.lk](http://www.ruh.ac.lk)

**TO BE COMPLETED BY THE HEAD OF THE DEPARTMENT WHERE APPLICABLE:**

**Vice Chancellor  
University of Ruhuna**

The application is forwarded. Please note that if selected, action will be taken to release/not release him/her from service.

Date: .....

**Signature of Head of the Department:.....  
(with Official frank)**

Date: .....

**Signature of Head of Institution: .....  
(with Official frank)**