Survey Department

OPEN COMPETITIVE EXAMINATION FOR RECRUITMENT TO THE POST OF INSTRUMENT TECHNICIAN GRADE III IN SRI LANKA TECHNOLOGICAL SERVICE - 2025

		(For Office use only)
Sinha Tamil Englis	um of Examination la - 1	(For office use only)
	1.1 Name with initials using initials at the end:	
	(In English block letters) Eg. PERERA A.B.C.	E 1111 114)
	1.2 Name in Full:(In 1.3 Name in Full:	,
	1.4 National Identity Card No.	. (III Siiiilaia/ III Taiiiii)
	1.5 Gender:	
]	Male - 1 Female - 2 (Indicate the relevant number in the given cage)	
	3.3 National Identity Card No	
	3.4 Date of Birth: Date Month Year	
	3.5 Age as at: Dates Months Years	
	3.6 Gender: (Male - M Female – F)	
	3.7 Civil Status: Married Unmarried (Put the mark "" in the relevant cage)	
	3.8 Mobile Telephone No. :	
4.0	Permanent Address:	
	(In English block letters)	
	4.1 Permanent Address:	
	(In Sinhala/Tamil)	
	4.2 Address to which admission card should be sent:	
	(In English block letters)	
	4.3 Telephone Number (if any):	

5.0	Candidate's permanent residential district:						
	5.1 Divisional Secretariat:						
6.0	Educational Qualifications: (Certified copies of relevant certificates should be attached) 6.1 Details of G.C.E.(O/L) examination:						
	(i) Year and Month of the examination: (ii) Index Number : (iii) Result:						
	Subject	Grade	Subject	Grade			
	1.		6.				
	2.		7.				
	3.		8.				
	4.		9.				
	5.		10.				
	Subject	Grade	Subject	Grade			
7.0		s:(Certified copies of	relevant certificates should be attack				
7.0	Vocational/Technical Qualifications 7.1 Degree/Course followed:	s:(Certified copies of ch the degree/course	relevant certificates should be attach				
7.0	Vocational/Technical Qualifications 7.1 Degree/Course followed: 7.2 Name of the institution of whi 7.3 Duration of the degree/course: Other Qualifications:	s:(Certified copies of ch the degree/course	relevant certificates should be attach				
	Vocational/Technical Qualifications 7.1 Degree/Course followed: 7.2 Name of the institution of whi 7.3 Duration of the degree/course: Other Qualifications:	s:(Certified copies of ch the degree/course	relevant certificates should be attach	ned)			
8.0	Vocational/Technical Qualifications 7.1 Degree/Course followed: 7.2 Name of the institution of whi 7.3 Duration of the degree/course: Other Qualifications:	s:(Certified copies of ch the degree/course f	relevant certificates should be attach	ned)			

10.0			ou are a person who have previously served in Public/Provincial Public Service and departed, the reason for such arture:		
11.0)	Det	ails of payment of examination fees:		
	1	1.1	Office at which the payment made:		
	1	1.2	Receipt No. and date:		
	1	1.3	Amount paid: Rs		
			Firmly affix the examination fee payment receipt here (keep photocoy of the receipt with you)		
12.0)	Cer	tification of candidate:		
	•		I declare that the particulars furnished by me in this application are true and correct to the best of my knowledge. I agree to bear the loss resulting from not completion some sections of the application and/or incorrect completion of the application. Further, I declare that all the sections of this application are perfected correctly.		
	• I am aware that if the declaration made by me is found to be false, I am liable to disqualification before appointme and to dismissal from service if the inaccuracy is detected after appointment.				
	• I agree to be bound by the rules and regulations imposed by the Surveyor General on conducting the examination and decisions taken on issuance of results.				
	•	•	I will not subsequently change any of the information furnished here.		
		Dat	e:		
			Signature of the Candidate		

13.0	O Attestation of candidate's signature:		
	I certify that Mr./Mrs./Miss	who is submitting the application is	
	Date :	Signature of the Attester	
Full 1	l Name of the Attester:		
	signation:		
Addr	dress:		
(Sho	ould be confirmed by affixing the official stamp)		
14.0	Applicable only for officers who already serving in Government or Semi Government institutions. Attestation of the head of the department/institution:		
	I hereby certify that Mr./Mrs./Miss		
		of the Department/Institution.	