Application for the Post of Manager - Information Security Operations

Personal Information

		For Office use only
Full Name		
Name with Initials		
Date of Birth	DD / MM / YYYY	
Age		
Gender		
NIC No		
Mobile No (1)		
Mobile No (2)		
Personal E-mail		
Permanent Address		

Education & Professional Qualification

Bachelor's degree / Master's Degree		Effective Date	If available please mark (✓)	
Name of the Qualification	**Institute/University**			
		DD/MM/YYYY		
		DD/MM/YYYY		

Professional Certifications		Effective Date		
	Certified Information Systems Security Professional (CISSP)	DD/MM/YYYY		
	Certified Information Security Manager (CISM)	DD/MM/YYYY		
	Certified in Risk and Information Systems Control (CRISC)	DD/MM/YYYY		
	Certified Ethical Hacker (CEH)	DD/MM/YYYY		

Other Qualifications

Name of the Qualification	Institute/University	Overall Result	Effective Date	
			DD/MM/YYYY	
			DD/MM/YYYY	

Work Experience

Present

Company	Designation	Duration		Nature of Duty	
		From	**To**		
		DD/MM/YYYY	DD/MM/YYYY		
		DD/MM/YYYY	DD/MM/YYYY		
		DD/MM/YYYY	DD/MM/YYYY		
		DD/MM/YYYY	DD/MM/YYYY		

Non-Related Reference Details

Name	
Designation	
Organization	
Mobile	
E-mail	

Declaration

I hereby confirm that the above-provided information is true, accurate, and complete to the best of my knowledge and belief.

Signature		**Date**	DD	MM	YYYY