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தேசிய ஒற்றுமை மற்றும் நல்லிணக்கத்திற்கான அலுவலகம்  
Office For National Unity And Reconciliation



Reference No. : ONUR/RCM/2026/Driver

**Application Form for Recruitment to the Post of Driver**

**1.0 Personal Information**

| No.  | Description                                     | Information to be Completed by the Applicant |
|------|-------------------------------------------------|----------------------------------------------|
| 1.1  | Name with Initials (In English Capital Letters) |                                              |
| 1.2  | Full Name (In English Capital Letters)          |                                              |
| 1.3  | Full Name (In Sinhala / Tamil)                  |                                              |
| 1.4  | Permanent Address (In Sinhala / Tamil)          |                                              |
| 1.5  | Permanent Address (In English Capital Letters)  |                                              |
| 1.6  | Gender                                          |                                              |
| 1.7  | Marital Status                                  |                                              |
| 1.8  | Nationality                                     |                                              |
| 1.9  | National Identity Card Number                   |                                              |
| 1.10 | Date of Birth                                   | Date: _____ Month: _____ Year: _____         |
| 1.11 | Contact Number                                  | Mobile: _____ Landline: _____                |
| 1.12 | E-mail Address                                  |                                              |
| 1.13 | District                                        |                                              |

## 2.0 Educational Qualifications

### 2.1 G.C.E. (Ordinary Level) Examination

Year : \_\_\_\_\_

Examination Index Number : \_\_\_\_\_

| Subject | Grade | Subject | Grade |
|---------|-------|---------|-------|
| 1.      |       | 6.      |       |
| 2.      |       | 7.      |       |
| 3.      |       | 8.      |       |
| 4.      |       | 9.      |       |
| 5.      |       | 10.     |       |

### 2.2 Other Educational Qualifications

| Educational / Professional Qualification | Institution | Year Obtained |
|------------------------------------------|-------------|---------------|
|                                          |             |               |
|                                          |             |               |
|                                          |             |               |
|                                          |             |               |
|                                          |             |               |

### 3.0 Professional Qualifications

Please provide details of the relevant professional qualifications below.

| No. | Professional Qualification | Institution / Professional Body | Year Obtained |
|-----|----------------------------|---------------------------------|---------------|
| 1.  |                            |                                 |               |
| 2.  |                            |                                 |               |
| 3.  |                            |                                 |               |
| 4.  |                            |                                 |               |
| 5.  |                            |                                 |               |

#### 4.0 Other Qualifications / Skills

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#### 5.0 Employment Experience

Please provide details of relevant employment experience in chronological order, including your current / last employment.

| No. | Institution / Place of Employment | Position Held | Period of Service     | Nature of Employment               |
|-----|-----------------------------------|---------------|-----------------------|------------------------------------|
| 1.  |                                   |               | From: _____ To: _____ | Permanent /<br>Contract /<br>Other |
| 2.  |                                   |               | From: _____ To: _____ | Permanent /<br>Contract /<br>Other |
| 3.  |                                   |               | From: _____ To: _____ | Permanent /<br>Contract /<br>Other |
| 4.  |                                   |               | From: _____ To: _____ | Permanent /<br>Contract /<br>Other |
| 5.  |                                   |               | From: _____ To: _____ | Permanent /<br>Contract /<br>Other |

#### 5.1 Current Employment

**Institution :** .....

**Position :** .....

**Date Joined :** .....

**Current Monthly Salary :** .....

**Nature of Employment :** Permanent / Contract / Casual / Temporary / Other

## 6.0 Relevant Experience

Please provide details of experience relevant to the post of Driver.

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## 7.0 Relevant Special Achievements / Contributions

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## 8.0 Details of Two Non-Related Persons Who Can Provide Information about the Applicant

| Description                                  | First Person | Second Person |
|----------------------------------------------|--------------|---------------|
| Name                                         |              |               |
| Position                                     |              |               |
| Institution                                  |              |               |
| Contact Number                               |              |               |
| E-mail Address                               |              |               |
| Full Address                                 |              |               |
| Professional Relationship with the Applicant |              |               |

### 9.0 Declaration of the Applicant

I hereby declare that all the information provided by me in this application form is true and accurate to the best of my knowledge and belief, and I acknowledge that if any information is found to be false or incorrect, I may be disqualified for this post or my appointment may be cancelled.

**Date :** ..... **Applicant's Signature :** .....

**Place :** ..... **Name :** .....

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### 10.0 Certification by the Head of the Institution (If Applicable)

I certify that Mr. / Mrs. / Ms. ....  
has been serving in the position of ..... at  
.....from  
..... on a Permanent / Contract /  
Casual / Temporary basis, and that if selected for this post, he / she can / cannot be released  
from service.

| Description                                                | Information |
|------------------------------------------------------------|-------------|
| Signature and Official Seal of the Head of the Institution |             |
| Name                                                       |             |
| Position                                                   |             |
| Ministry / Department / Institution                        |             |
| Date                                                       |             |