

CARE SRI LANKA

PERSONAL HISTORY AND EXPERIENCE RECORD [Job Application Form]

All information will be kept strictly confidential

**Please print all information
requested.**

Position applied for :		
1. FULL NAME:		
2. SURNAME	FIRST NAME	OTHER NAMES
4. Present Address		5. Permanent Address
6. Contact Telephone No Office	Residence	Others
7. Date of Birth	Age	Place of Birth
8. Sex () Male () Female	7. Marital Status () Single () Married	8. If married, no. of children () Sons () Daughters
9. Nationality		Religion
9. National Identity Card No		Date Issued
10. Driving License No.	Date Issued	Types of vehicles authorised to drive
11. Do you have relations/friends currently employed by CARE ? If so, indicate their names and relationship		
Name		Relationship
12. Have you at any time worked for CARE-Sri Lanka or CARE Organization in any other Country? If so,		
Designation	Date From To	Country Reference

13. Academic Qualifications – (College/School). *Please give full details and attach copies of certificates.*

Name of College/School attended	Period attended	Highest examination Passed, scholarships other honours and subjects offered
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14. List any offices held in College/School or in Groups

Name	Other Particulars
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15. Academic Qualifications (University/Institution) *-Please give full details & attach copies of certificates*

Name of the University/ Institution - period attended.	Highest degree examination passed, division. Subjects offered, scholarships and other honours received.
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17. Professional Qualifications – Please give full names, titles and dates. *(Do not use abbreviations).*

(a) Name of College/ University/ Institution/ Professional body		
(b) Field of study or training		
(c) Degree, Diploma and Certificates obtained		
(d) Scholarships and other Honours received		
(e) Period attended		
	From	To

18. Are you presently employed ? If so, give full particulars of your present job

Designation

Name and Address of
Employer

Date of Employment

From

To

Reasons for Leaving

Present Salary

Responsibilities and tasks:

*(List the jobs you held, duties
performed, skills used or learned,
advancements or promotions while
you worked at this organization)***19. Have you any objections to our inquiring about you from your present Employer ?****20. Work experience** (list only employment lasting six months or more). Begin with the present or the most recent employment, Give full names, titles and dates. Use additional sheets if necessary. *(Do not use abbreviations)*

(i) Name and address of Employer -

Your Functional title

Date of Employment

From

To

Last Salary drawn

Rs

Reason for leaving

Responsibilities & tasks

(List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this organization)

(ii) Name and address of Employer -

Your Functional title

Date of Employment

From

To

Last Salary drawn

Rs

Reason for leaving

Responsibilities & tasks

(List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this organization)

(iii) Name and address of Employer -

Your Functional title

Date of Employment

From

To

Last Salary drawn

Rs

Reason for leaving

Responsibilities & tasks

(List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this organization)

21. Additional professional skills

22. Are you presently or in the future under any obligatory National/ Military/ Government services etc.

- () No
() Yes (be specific)

23. If selected for employment, when could you begin work ?

24. Knowledge of languages (indicate Yes/No)

	English	Sinhala	Tamil	Others
Speak	- _____	_____	_____	_____
Read	- _____	_____	_____	_____
Write	- _____	_____	_____	_____

25. Have you ever traveled outside your home country ? If yes, indicate country and purpose of travel

26. Medical History -

(Describe any significant physical or mental illness or handicap you have had)

27. Have you ever been convicted of any legal offenses.

(Excluding minor traffic violations)

- () No
() Yes. *(Please explain)*

28. Non-related referees: (Do not include family members or relatives)

Name -	Profession and/or Designation	Full address & Tel. No/E-mail address.
1.		
2.		
3.		

29. Taking into account your background, education and experience, please explain fully your reasons for applying –

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I certify that the above statement made by me are true, complete and correct.

Signature of applicant

Date