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எனது இல.
My Ref.

ED/03/40/01/36-ii (2022)

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உமது இல.
Your Ref.

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திகதி
Date } 06.06.2022

Post Graduate Scholarship Program in Education Management (MPA in Education Management) for the officers in the Sri Lanka Education Administrative Service (SLEAS)/Sri Lanka Teacher Educator Service (SLTES)

The arrangements have been made by the Human Resource Development Branch of this Ministry to conduct a Post Graduate Scholarship Program in Education Management (MPA in Education Management) for the officers in the Sri Lanka Education Administrative Service/Sri Lanka Teacher Educator Service and the applications are invited from the interested SLEAS/SLTES officers to participate for the aforesaid program.

02. This program scheduled to be conducted in Colombo as a weekend program will be conducted in English medium. The course fee of the officers selected for the program will be paid by the Ministry of Education and the other expenses such as meals, travelling and accommodations should be borne by the relevant officer. Also, the formal approval for the duty leave required for the course should be obtained by the officer. The officer should enter into an agreement as per the sub-section 14:4 in the Chapter XII of the Establishments Code prior to the commencement of the course.

03. The officers interested in applying for this course should complete an application according to the format attached herewith and send to the Director of Education (Human Resource Development), Ministry of Education, Isurupaya, Battaramulla or email to hird.moe@yahoo.com before 30.06.2022. You are kindly requested to take actions to inform all the relevant officers in this regard. Please feel free to contact 0112784565 for further details.

M.N.Ranasinghe
Secretary
Ministry of Education

Copies:

1. Zonal Director of Education, - For informing all relevant officers

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கேள்வாள அமைச்சர்
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Post Graduate Scholarship Program in Education Management (MPA in Education Management) for the officers in the Sri Lanka Education Administrative Service/ Sri Lanka Teacher Educator Service (SLEAS/SLTES)

1. Name of the officer : Rev/Mr./Mrs./ Miss.
2. Post :
3. Date of admission to the SLEAS/SLTES:
4. Class :
5. Date of admission to the above class:
6. Current Service Station:
7. Personal Address:
8. Subject area related to the post:
9. Date of Birth and Age as at 31.03.2022:
10. Highest Educational Qualifications obtained:
11. Professional Qualification obtained:
12. Period of Active Service as at 31.03.2022:
13. WhatsApp Number:
14. Email address:.....
15. Proficiency in English Language:.....

	Very Good	Good	Average	Weak	Very Weak
Reading					
Writing					
Spoken					

I certify that the above particulars are true.

Date:

.....
Signature of the Officer

Recommendation of the Head of Institute

I certify that this officer is serving in this institute and there are no any disciplinary inquiries or audit queries against him/her.

Date:

Signature of the Head of Institute
(P.D.E /Z.D.E /Principal)
(President/Principal/Center Manager)
Official Stamp