

Application for Undergoing Teachers' Training Courses in Teachers' Colleges 2024/2025

1. Medium :

2. Course applies for :

3. Date of assumption of duties
as per first appointment letter:

4. Nature of the first appointment, subject and the service / grade you belong to:

a) Nature of the first appointment:

Sri Lanka Teachers' Service	-	01	
Teacher Assistants	-	02	
Pirivena	-	03	
Private Schools Teachers' Service-		04	
Other (pl. mention)	-	03	

b) Subject of appointment

c) Relevant grade

5. Name of the **Teachers' College** chosen by you for the course (pl. see 2.3 of the instructions leaflet)

- 1.....
- 2.....

6. Name with initials (in block capital letters. Write the last name first and initials at the end.

Ex: PERERA, A.B.):

Rev./Mr./Mrs./Ms.

7. Names denoted by initials (In block capital letters)

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8. Sex (write the number in the adjoining cage)

Male - 1 Female – 2

9. National Identity Card no. :

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10. (a) Date of birth :

(b) Age at 30/08/2024: Years : Months : Days :

11. Telephone no. : Home : Mobile :

12. E-mail address (if any) :

13. Personal address (In block letters)

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14. 1) Present place of work, address, (In block letters)

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.....

District:..... Zone:.....

2) Nature of the place of work (write relevant no. in the adjoining cage)

Government school - 01, Estate school-02, Government Approved Pirivena - 03

Government Approved Private School - 04, Other - 05

15. Statement of the Applicant :

I do hereby certify that the particulars furnished herewith are true and accurate and that I am not undergoing any other institutional training currently.

.....
Date

.....
Signature of the Applicant

16. Recommendation of the Principal

This is to certify that the applicant above is an employee of this school and the particulars furnished by him / her herewith are true and accurate.

It is agreed to release this teacher from duties if selected for the said teachers' training.

.....
Date

.....
Signature and official stamp of the
Principal

17. Recommendation of the Zonal Director of Education

It is agreed to release this teacher from duties if selected for the said teachers' training.

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Date

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Signature and official stamp of the Zonal
Director

18. Recommendation of the Provincial Director of Education

It is agreed to release this teacher from duties if selected for the said teachers' training.

.....
Date

.....
Signature and official stamp of the
Provincial Director