<div align="center">

APPLICATION FOR THE POST OF DRIVER
MINISTRY OF INDUSTRIAL DEVELOPMENT, SMEs AND COOPERATIVES
(Industrial Development Division)

</div>

Section A (To be filled in by Applicant)

1. Title: Mr ☐   Mrs. ☐   Miss ☐
   (Please tick as appropriate)

2. Surname (in block letters): …………………………………………………………………………...

3. Other Names (in block letters): ………………………………………………………………….....

4. Date of Birth: ………………………………5. National Identity No: …………………………………

6. Residential Address (in block letters): ……………………………………………………………......

   …………………………………………………………………………………………………..

7. Tel (Office): ………………… Tel (Residence): ………………. (Mobile) ……………………......

8. Present post held (whether Temporary/Substantive): ……………………………………….………..
   (*delete as appropriate*)

9. Date of Present Appointment: ……………………..……………………………………..………..

10. Present Posting: (i) Ministry/Department: ……………………………………..……...

    (ii) Place of Work: ………………………………………………….

11. Date joined service: ………………………………………………………………………..

12. Date of first appointment: …………………………………………………………………….

13. Date transferred on Permanent and Pensionable Establishment (PPE): ……………………..……

14. Present salary per month (Basic): Rs. …………………………………………………………..

15. Previous appointment held in Government Service:

Appointment	From	To	Ministry / Department

16. Educational Qualifications (*Please attach photocopy of certificates, if any*):

    (i) Primary: ………………………………………………………………………….…………

    (ii) Other: …………………………………………………………………………………………..

17. Type of valid Driving Licence/s possessed – specify whether manual gear or not
    (*please attach photocopy of the licence/s*)

    ………………………………………………………………………………….................

18. Experience relevant to the post applied for (*attach documentary evidence of experience claimed*):

    ………………………………………………………………………………………………...

    ………………………………………………………………………………………………...

    Date: …………………………   …………………………………………...

    <div align="right">Signature of Applicant</div>

Section B (To be filled in by Human Resource Section of the Ministry/Department concerned)

(i)   **Record of sick leave**   **Record of unauthorised absence**

2021: …………………..…   2021: ……………………………..

2022: ……………………...   2022: …………………...…………..

2023 (to date): ………...……   2023 (to date): ………………………...

(ii)   **Report on Applicant**:

Work: ………………………   Conduct: ………………………………................

Attendance: ………………………………………………………………….………

(iii)   Whether officer has been subject to disciplinary action during the last ten years.
If in the affirmative, please give details:

……………………………………………………………………………….……......

…………………………………………………………………………………….......

…………………………………………………………………………………….......

(iv)   I certify that particulars given by Applicant in Section A have been verified and found correct, except:

………………………………………………………………….………………...

………………………………………………………………………………………...

(v)   Comments, if any, on experience claimed by Applicant and any other remarks.

………………………………………………………………………………………...

………………………………………………………………………………………...

Date: …………………..   …………………………..….

                                                       (Signature of Officer)

Stamp of Ministry/Department

Name (in full): ………………………………

Post held: ……………………………….......

Contact No. ………………………………