


<p style="text-align: center;"><u>Guidelines</u></p> <ul style="list-style-type: none"> • Write, type or print in ink. Use additional paper if necessary. • Attach certified copy of the enrolment certificate as an Attorney-at-Law. • Attach certified copies of transcripts issued by Sri Lanka Law College and any other higher Educational Institutions • Attached certified copies of testimonials 	 ATTORNEY GENERAL'S DEPARTMENT (PERSONAL HISTORY OF APPLICANT)		Photograph
1. Name with Initials	Names denoted by Initials	Other Names	Maiden Name
2. Date of Birth (D/M/Y) 3. NIC No.	4. Sex M <input type="checkbox"/> F <input type="checkbox"/>	5. Marital Status : Single <input type="checkbox"/> Married <input type="checkbox"/> Widow(er) <input type="checkbox"/>	
6. Permanent Address : Telephone: Fax: E-mail:		7. Present Address : (If different from Permanent Address) Telephone: Fax: E-mail:	
8. Dates of entry and leaving School/Schools: Date of Entry: Date of Leaving:			
9. Dates of entry and leaving of Sri Lanka Law College:			
10. Date of admission to the Bar in Sri Lanka and the enrolment No.			
11. Indicate Classes received and marks obtained at Law College: (attach proof)	Preliminary	Intermediary	Final
12. If qualified as a Barrister, give date and particulars:			
13. Achievements, awards and participation debates, clubs, sports and any other activities at school, Law College and other Higher Educational Institution:			

14. Membership in Associations/ Professional bodies:				
15. Other Qualifications: (eg. Masters Degree, Diploma, Computer Literacy, etc)				
16. Details of Present Employment:				
17. Previous Employment: (If any)				
18. Knowledge of Languages: Indicate your first language;				
Proficiency of Languages	Read	Write	Speak	Highest exam passed
Sinhala	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Tamil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (Indicate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (Indicate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Preferred Medium of the Recruitment :				
Sinhala <input type="checkbox"/> Tamil <input type="checkbox"/> English <input type="checkbox"/>				
(Select based on the medium of Secondary/ Tertiary Education OR Medium of the Professional Qualification Obtained.)				
20. Give particulars if any physical impairment from which you may or have suffered:				
21. REFERENCES: List three persons, not related to you, who are familiar with your character and qualifications. Do <u>not</u> repeat names or persons listed under item 22.				
FULL NAME	ADDRESS		OCCUPATION	
1.				
2.				
3.				
22. Give the name of Two Judicial officers in Sri Lanka before whom you have practiced:				
Name of the Judicial Officer	Court		Present Official Address	
1.				
2.				
23. Have you submitted an application to this Department earlier, if so, give the reference number of the acknowledgement sent by the Department:				
I certify the above particulars are correct and true to the best of my knowledge:				
Date:			Signature:	