

SPECIMEN APPLICATION FORM

Open Competitive Examination for the Post of Driver (Departmental) and the Post of Ambulance Driver - Primary Level Skilled (Grade 111) Category at the Department of Prisons-2026

- Mark a tick (✓) inside the box corresponding to the post you are applying for.

Driver (Departmental) ☐

Ambulance Driver ☐

(Please Note: Submit only one application form for one post. If you wish to apply for both posts, two separate applications must be submitted independently).

01. i. Full Name:

ii. Name with Initials:

02. Permanent Address:

03. National Identity Card (NIC) Number:

04. Telephone Number:

05. Administrative areas of the residential address:

I. District:

II. Police Station:

06. Date of Birth: Year: Month: Day:

07. Age as at 07.08.2026 Years: Months: Days:

08. Citizenship (By Descent / By Registration):

09. Marital Status: Married – 1, Unmarried - 2 (Write the relevant number inside the box)

10. Educational Qualifications (Must be stated clearly):

(Attach photocopies of certificates)

General Certificate of Education (Ordinary Level) Examination Results:

I. First Attempt-

Year

Index No -

No	Subjects	Gade
1		
02		
03		
04		
05		
06		
07		
08		
09		
10		

II. Second Attempt-

Year

Index No.-

No	Subjects	Grade
01		
02		
03		
04		
05		
06		
07		
08		
09		
10		

11. Valid Driving License Number and Vehicle Class:

(Attach a photocopy of the valid driving license)

I. Experience (Years):

II. Special Qualifications:

12. Professional Qualifications:

13. Physical Fitness:

I. Height: Feet: Inches:

II. Chest (Unexpanded): Inches:

14. Have you ever been convicted of any offense by a Court of Law? Yes / No

(If yes, provide details)

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15. Payment of Examination Fees:

Amount Paid	Paid Bank Branch	Paid Date	Receipt Number

Paste the Receipt Here.

16. Certificate of the Applicant:

I, hereby certify that the information furnished by me in this application is true and correct. I am well aware that if any information provided by me is found to be false or incorrect prior to the examination, I will be disqualified from sitting the examination, and if it is disclosed after the appointment, my appointment will be cancelled without any compensation.

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Date:

.Signature of the Applicant

17. Attestation for Applicants Currently Employed in Public Service / Provincial Public Service Only:

I, hereby state that Mr. is currently employed in this institution as a, his work and conduct are satisfactory, he is/is not subject to any pending disciplinary inquiries/disciplinary actions, and if selected for this post, the applicant can/cannot be released from his current position.

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Date:

Signature of Head of Department / Institution: