

Photos Ref. No.

The Open University of Sri Lanka

APPLICATION FOR A STAFF IDENTITY CARD

	(If the following information is incorrect, re-correct them clearly using a Red pen)														_							
(if the following information is incorrect, re-correct them clearly using a Red pen) Please fill clear Block capital letters																						
Employee Number	:																					
Title	:	Re	ev.	Pro	of.	Dr.	. N	ſr.	Mr	s. N	Mis	s.										
Last Name	:																					
Initials	:																					
Names denoted by Initials	:																					
Designation	:																					
Department/ Branch:																						
Faculty	:																					
NIC No.	:																					
Permanent Address	:																					
Date of Appointment	:	D	D	M	M	Y	Y	Y	Y													
Phone (Mobile)	:																					
Phone (Office)	:											In	ter	co:	m	:[
Signature of Applican	ıt:																					
												D	ate	e :	D	D	M	M	Y	Y	Y	Y
Recommended / Not Recommended																						
										Senior Assistant Registrar / General Administration												

Rubber Stamp

Date: