

DP/AL/2005/5

Specimen Application Form For Private Candidates
GENERAL CERTIFICATE OF EDUCATION (ADVANCED LEVEL)
EXAMINATION APRIL - 2005

(Read the Newspaper advertisement before filling this form)
Use your own hand writing

(for Office use only)

01. Town selected to sit the exam: Town No:
02. Full Name:
(i) In English
(ii) In Sinhala/Tamil
(Do not write your name with initials only)
03. Address: (i) In English (ii) In Sinhala/Tamil
04. (i) Date of Birth: Year: Month: Day:
(ii) Age as at 01.01.2005 Year Month: Day:
05. Subjects applied for and subject Nos.

Subject	Subj. No.	Subject	Subj. No.
i)	<input type="text"/>	iv)	<input type="text"/>
ii)	<input type="text"/>	v)	<input type="text"/>
iii)	<input type="text"/>		
06. Total number of subjects applied for
07. National Identity Card No:
08. Fees paid (in words) Rs. (In figures) Rs.
09. Gender: Male (0) Female (1)
10. Language Medium: Sinhala (2) Tamil (3) English (4)
11. Attempt:
12. Have you completed No. 16 of this application in respect of the Certification of the Principal or a Teacher, to the effect that the practical tests/projects have been completed:
13. Certification of Identity:
I certify that the applicant is known to me personally, and that the details furnished in cages 01, 06, 07, 08 and 10 are correct, and also that the candidate placed his/her signature in my presence.
-
Signature of Candidate
Date:
-
Signature of Attester
Name:
Designation:
(Place Rubber Stamp here)
Address:
Date:

14. I confirm that I have deposited Rupees(in words) (in figures)
 on 2003 atPost Office/Sub Post Office and obtained Receipt No.....

No. of Subjects	1	2	3	4	5
Examination Fees Rs.	60/-	120/-	180/-	240/-	300/-

Paste in this cage the receipt obtained from the Post Office for the payment of examination fees. Keep a photocopy of the receipt (or Date, Number and the Name of the Post Office) with you.

If the original receipt is not pasted your application will be rejected.

15. If you seek entry to a University you must sit the Common General Test Paper. And if you indicate that you would not sit this paper no chance to sit would later be afforded.

15. Certification of Candidate

I
 (Name of Candidate)

of
 (Address)

hereby declare and affirm that (1) the particulars given by me in this application are true and correct (2)and that I agree to abide by the rules and regulations imposed by the Public Examinations Act , in respect of examination candidates (3) and that I agree to abide by the decisions taken by the Commissioner General of Examinations regarding this examination.

.....
 (Signature of Candidate)

Date:

16. Certificate of the Principal and the Subject teachers of the school where the candidate sitting for the first time has registered himself with for his Practical/Assignments/Projects.

Serial No	Subject No.	Subject	To be Completed before the exam		So far Completed	
			No of projects	No of Practical Tests	No of projects	No. of Practical Tests
01						
02						
03						

I certify that the applicant who is at the School Activities and Private Schools Branch of the Ministry of Education under the registration No. and has been directed to my School has , as per the Circular No. 02/2004 dated 28/01/2004, of the Secretary of Education, fulfilled all the requirement needed for sitting G.C.E. (A/L) and, particulars given in No. 16 are true and correct.

Date:

.....
 Signature of the Principal

.....
 Name and the Address of the School.

.....
 Official Stamp