For Office Use Only	

Department of Official Languages Application for Official Language Proficiency Oral Examination - 2021

District	
(Mention the dis	strict to which the official address belongs)
The Examination	on is applied for on the basis of (put " $$ " in the relevant cage)
* passing the	e Official Language Proficiency Written Examination
* passing the	e G.C.E (O/L) Language & Literature (Sinhala/Tamil)
* passing the	e G.C.E (O/L) Second Language (Sinhala/Tamil)
The language ap	pplied for (mention in the cage the relevant number for the language in which ald be obtained)
Sinhala -	Tamil - 3
The level applied	d for (mention in the cage the relevant number for the proficiency level applied for)
Level - Level -	1 Level - 3 2 Level - 4
	plication for the oral examination, the language and the proficiency level applied ccurately mentioned and no changes can be made thereto later on under any
	name with initials at the end: (in English block capitals) Çço: RANATHUNGA, M.A.G
••••••	
	Candidate: (in English block capitals) Ex: MUTHUKUDA ARACHCHIGE ANATHUNGA.
3. Full name of 0	Candidate (Sinhala/Tamil) (Ex: මුතුකුඩ ආරච්චිගේ ගාමිණී රණතුංග)
4. Address: (in address)	English block capitals) (admission card and the results sheet will be posted to this
5. Designation:	
	6 137
6. National Idea	ntity Card No:
7. Contact Num	nber : Mobile
	: Resident

8. Mention the following particulars of the certificate you received to the effect that you have passed the Official Language Proficiency Written Examination / G.C.E (O/L) Language and Literature (Sinhala/Tamil) / GCE (O/L) Second Language (Sinhala/Tamil):
(i) Index No: (ii) Year:
(iii) Results or Marks:
9. Exam Fee: Rs The branch of the Bank where the payment made:
Date of payment: Receipt No:
I hereby declare that the information furnished above is true and accurate, that I accept any decision taken by the Commissioner General of Official Languages on any matter pertaining to the examination shall be final, that I subject to the rules and regulations of the examination and that I read and understood all the conditions pertaining to the examination mentioned in the notice.
Signature of the applicant
Signature of the applicant (In the presence of the Head of Institution)
Date :
Certification of the Head of institution
I certify that the above applicant is serving in my office and the information he/she has furnished from 01 to 07 in this application form is true and accurate and that he /she placed his/her signature in my presence on
Signature:
Name:
Designation:
Official Stamp: