



**National Institute of Education Maharagama  
Diploma in Teaching Sinhala / Tamil as Second Language**

( Tick in the relevant box)

Experience in Teaching Second Language	
1-10 Years	
Above 10 Years	

Second Language	
Sinhala	
Tamil	

**01 Name with Initials** : Rev/ Mr/Mrs/Ms .....

**Name in Full:** : .....

**02 Address** : .....

**Residence** : .....

**Office** : .....

**03 Contact Numbers** :

**Residential** : .....

**Official** : .....

**Mobile** : .....

**04 Date of Birth** : .....

**Age** : ..... (20.02.2019.)

**NIC Number** : .....

**05 Designation** : .....

**06 Educational Qualifications:**

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**07 Highest Qualification in Second Language (Sinhala / Tamil)**

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.....  
Signature of Candidate

.....  
Date

<b>08</b>	<b><u>Recommendation of the Head/ Principal :</u></b>
I recommended and forward herewith the application of Rev./ Mr/ Ms .....	
Signature Date: .....	<b>Official stamp</b>