



11. Service you belong to :

SLEAS		SLPS		SLTES		SLTS-I		Semi Gov./Pirivena	
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12. Qualifications:

Academic

First Degree	
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Professional

Trained/NCOE		PGDE		B.Ed.		Master of Edu.	
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I certify that the above mentioned information is correct. I also declare that I am not following a full-time/part-time course at the National Institute of Education or a full time study program in any other higher education institution.

Date.....

Signature of the applicant

**Recommendation of the head of institution**

I certify that Rev. /Ms. /Mrs. /Mr. ....  
 Is currently employed in this institution as .....  
 And that the person can be released/cannot be released from duties for the full-time studyprogram for one year in the event of being selected to follow the Postgraduate Diploma in Education at NIE in 2020.

If not recommending the application, please state reasons below:

.....  
 .....  
 .....  
 .....

Date: .....

.....

Name and Signature  
 SEAL

Name of Institution: .....

Address: .....

Contact No: .....