

PERSONAL PARTICULAR FORM FOR THE SECURITY CLEARANCE
FOR VISA ISSUANCE OF STUDENTS/ EMPLOYEES

(PLEASE USE BLOCK CAPITAL LETTERS)

Passport Size photograph
to be attached (Front
appearance 3.5cm X
4.5cm)

1 . Family name	:					
2 . First name	:					
3 . Middle name	:					
4 . Maiden name, if any	:					
5 . Date of Birth	:	DD/MM/YEAR	6. Place of Birth :			
7 . Nationality at birth	:		8. Religion :		9. Blood Group :	
10 . Present Nationality	:		11. Sex :	Male <input type="checkbox"/>	Female <input type="checkbox"/>	
12 . Permenent address and Telephone No.			13. Present address (if different from) and Telephone/ Fax No.			
Address	:			Address :		
Home Tel.	:			Telephone No		
Mobile	:			Fax No. :		
E-mail	:					
14 .Office Address	:					
Telephone No	:					
Fax No	:					
E-mail	:					
15 . Passport Number	:				16. Type of Passport	
17 . Previous Passport Numbers	:					
18 .Details of Social Media	:					
Facebook	:			imo	:	
Viber	:			Twitter	:	
WhatsApp	:			Instragram:		
Other	:					
19 . Marital Status	:	Single <input type="checkbox"/>	Married <input type="checkbox"/>	Separated <input type="checkbox"/>	Widow(er) <input type="checkbox"/>	Divorced <input type="checkbox"/>
20 . Spouse	:					
		Full Name	Date of Birth	Passport No	Nationality	Current Address
21 . Children	:					
		Full Name	Date of Birth	Passport No.	Nationality	Current Address

22 .Details of the next of Kin. :					
a. Name :					
b. Permanent address :					
c. Telephone No :					
d. Fax No :					
e. E-mail :					
23 .Details of Parents :					
	Relationship	Name	Address	Passport No	Nationality
24 .Have you taken up legal permanent residence status in any country other than that of your nationality ? YES/NO if "YES", which country or countries					
25 .Type of Academic programme to be followed by you/ Type of work					
a. Name of the Course/ Programme/ Occupation					
b. Duration of the Course/ Programme/ Occupation					
From : _____ To : _____					
25 .1. Details of the academic Institution					
a. Name of the Institute :					
b. Address :					
c. Scope of the Institution :					
d. Registered No :					
e. Contact details of the Institute					
Telephone No : _____ Fax No : _____					
E-mail : _____ Web : _____					
26 .Language Proficiency					
Language		Reading	Writing	Speaking	
27 .If the purpose is related to lecturing/ working / volunteering explain the suitability and qualification of yourself to fullfill this purpose					

28 .Highest qualification acquired in the relevant field :

29 .Account Details

Name of the Bank	Country	Type of Account	Account Number	Date opened

30 .Details of stay in Sri Lanka

a. Period for Visa applied - From To

b. Main Sponsor's (State University)

Name of the University -
 Name of the Faculty -
 Name of the Vice Chancellor -
 Address -
 Contact Numbers -
 Email/ Web addresses -

c. Main Sponsor's (Non - State Institute)

Name of the Institute -
 Name of the Course -
 Name of the Chairman -
 Address -
 Contact Numbers -
 Email/ Web addresses -

31 .Co - Sponser Details (If available)

Full Name	PP/No / (ID Card No)	Current Address & Email	Telephone No	Occupation

32 .Additional accommodation places during your stay in Sri Lanka

Place	Full Address	Telephone No

33 .Whether you plan to stay in Sri Lanka with some other person from your country or outside Sri Lanka? YES/NO (if "YES" provide Details)

Name	Address	Passport	Relationship

34 .Have you visited SriLanka previously (provide details)

Duaration	Passport No.	Places visited / Addresses of stayed	Purpose of Visit

35 .Countries you have visited during last 07 years. If you need more space attach additional pages.

Country	Duration		Purpose of the visit
	Date	Period of stay	

36 .Employment records :- Starting with your present post, list in reverse order every employment you have had. If you need more space attach additional page.

Designation	Duration		Country
	From	To	

37 .Have you ever been arrested, indicated or convicted in a criminal trial (Excluding traffic offences) (If "YES" provided details)

38 .Additional information you like to provide in this application.

I certify that the statements made by me in answer to the foregoing questions are true, complete and correct to the best of my
39 knowledge and belief. In case of any information is found to be false or untrue or misleading or misinterpreting, I am aware that I
may be held criminally liable.

Date :

Signature :

