(A) COURSE

CRAFT LEVEL COURSE

Korea Lanka School of **Hospitality and Hotel Management**

PHOTO

Please indicate your preference by number	ering 1,2,5 &4.				
O Professional Cookery					
O Front Office					
O Food & Beverage					
O Hotel Housekeeping					
	'				
(B) PERSONAL DETAILS (IN CAPITAL LET	TTERS)				
Full Name:					
(As in NIC/Birth Certificate /Passport, to be filled in capital letters and underline the surname)					
Permanent Address:					
E-mail Address:					
NIC No.:	Tel No.(Home):				
	Mobile No.:				
D ((D))		T			
Date of Birth.:	Gender:	Female			
		Male			
Tribe:	Sinhalese				
	Tamil				
	Others (Please Specify)				
L	1		- 1		

(C) EDUCATIONAL QUALIFI	CATIONS		
(D) INDUSTRIAL EXPERIE	NCE (IE VOLLHAVE)		
(D) INDOCTRIAL EXILERAL	NOL (III TOO HAVE)		
Name of Hotel	Department	Period of service	Position Held
		Period of service	Position Held
		Period of service	Position Held
Name of Hotel	Department	Period of service	Position Held
	Department	Period of service	Position Held
Name of Hotel	Department	Period of service	Position Held
Name of Hotel	Department	Period of service	Position Held
Name of Hotel (E) ANY OTHER QUALIFIC	Department	Period of service	Position Held
Name of Hotel	Department		Position Held
(E) ANY OTHER QUALIFIC	Department		Position Held

(G) INSTRUCTION	
O You may use extra papers if the space is not sufficient.	
O Final decision of the selection will be inform by the school office.	
(H) DECLARATION	
I declare that the particular above are true to the best of my knowledge. I understand declaration, I shall be liable for disqualification or if already admitted, for expulsion	
	Signature of Applicant
Office Use	