

	COMPANY/ ORGANIZATION	DESIGNATION	Details of the work performed / Responsibilities	DURATION (YEARS)

(ii). Training / Teaching Experience: (Attach photocopies of service certificates)

	INSTITUTE/ ORGANIZATION	DESIGNATION	Details of the training / delivered	DURATION (YEARS)

11 Occupation in which you are qualified and competent enough to undertake assessments. (Put (√) Mark in relevant Box Below)

1. Construction Craftsman (Masonry) -MSN	<input type="checkbox"/>	14. Self-propelled Vibrator Roller Operator - SPVB	<input type="checkbox"/>
2. Wood Craftsman (Buildings) -WCB	<input type="checkbox"/>	15. Backhoe Loader Operator - BL	<input type="checkbox"/>
3. Wood Craftsman (Furniture) - WCF	<input type="checkbox"/>	16. Wheel Loader Operator - WL	<input type="checkbox"/>
4. Tile Layer -TIL	<input type="checkbox"/>	17. Hydraulic Excavator Operator - HE	<input type="checkbox"/>
5. Painter (Buildings) - PNT	<input type="checkbox"/>	18. Motor Grader Operator -MG	<input type="checkbox"/>
6. Electrician -ELC	<input type="checkbox"/>	19. Crawler Tractor Operator - CT	<input type="checkbox"/>
7. Plumber - PLB	<input type="checkbox"/>	20. Mobile Crane Operator - MC	<input type="checkbox"/>
8. Bar Bender - BBD	<input type="checkbox"/>	21. Dump Truck Operator - DT	<input type="checkbox"/>
9. Welder -WLD	<input type="checkbox"/>	22. Forklift Truck Operator - FLT	<input type="checkbox"/>
10. Aluminum Fabricator - ALF	<input type="checkbox"/>	23. Plant Transporter Operator - PT	<input type="checkbox"/>
11. Construction Equipment Mechanic - CEM	<input type="checkbox"/>	24. Skid Steer Loader Operator - SSL	<input type="checkbox"/>
12. Light Equipment Operator - LE	<input type="checkbox"/>	25. Truck Mounted Crane Operator - TMC	<input type="checkbox"/>
13. Tractor Operator - T	<input type="checkbox"/>	26. Other (specified)	<input type="checkbox"/>

12. Applicant is requested to make a payment of Rs 500.00 as processing fee to the Finance Division, CIDA or deposit to A/C No. 77454975 at any branch Bank of ceylon in favor of "Chairman, Construction Industry Development Authority" (Attach the original receipt of payment).

I hereby certify that the particulars mentioned above are true and correct to the best of my knowledge. Also, I am aware that if any information provided is found incorrect, the Construction Industry Development Authority has the right to cancel my Registration.

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Date

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Signature of the Applicant

Please stick here the Bank Receipt of the payment as can be removed