

ROYAL THAI EMBASSY, COLOMBO

APPLICATION FORM

Temporary Position – Consular Assistant (1 July-30 September 2026)

Application Date: _____

1. Personal Information

Full Name (Mr./Ms.): _____

Date of Birth: _____

Nationality: _____

National Identity Card No.: _____

Passport No. (if applicable): _____

Current Address: _____

Mobile Number: _____

Email Address: _____

2. Educational Qualifications

Qualification	Institution	Year Completed
GCE Ordinary Level		
GCE Advance Level		
Bachelor's Degree		
Other Qualifications		

3. Skills and Competencies

Language Proficiency

Language	Speaking	Writing
English	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair
Sinhala	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair
Tamil	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair
Other: _____	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair

Computer Skills

- Microsoft Word
 - Microsoft Excel
 - Microsoft PowerPoint
 - Email & Internet Applications
 - Database / Data Entry Systems
 - Other: _____
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4. Supporting Documents Attached

- Curriculum Vitae (CV)
 - Copy of National Identity Card
 - Copy of Educational Certificates
 - Copy of Professional Qualifications (if any)
 - Employment References / Service Certificates (if any)
 - Other Supporting Documents
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5. Declaration

I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that any false or misleading information may result in the rejection of my application or termination of employment if appointed.

Signature of Applicant: _____

Date: _____

For Official Use Only

Date Received: _____

Application No.: _____

Reviewed By: _____

Remarks: _____
