

SCHEDULE OF APPLICATION FOR ANNUAL TRANSFERS IN SPECIAL GRADE OF SRI LANKA ADMINISTRATIVE SERVICE -YEAR

Ministry:

Serial No.	Name of officer and Number of N.I.C	Date of Appointment	Personal Address	Date of Birth and age as at 31.12.2021	Previous Stations served and relevant time period	Reasons for requesting a transfer	Place willing to be transferred

I hereby certify that applications of all officers are included in this form.

Prepared by : Name..... Signature:.....

Checked by : Name..... Signature:.....

Date:.....

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Signature and official stamp of Head of Department