

Chitra Lane School for the  
Special Child, 45/3, Chitra  
Lane, Colombo 5



REGISTRATION No.

**APPLICATION FOR A FULL-TIME COURSE – 2023/2024**

**CERTIFICATE COURSE ON “CHILD CARE & THERAPY ASSISTANT (SPECIAL NEEDS)  
AT NVQ – LEVEL 4**

1. Name in Full: .....  
(In English Block Letters)
2. Name in Full: .....  
(In Sinhala or Tamil)
3. National Identity Card No: .....      **3.1. Age:** .....
4. Address: .....  
.....
5. E-mail Address : .....
6. Gender: Male / Female .....      **6.2. Civil Status:** .....
7. Telephone No. (Home): .....      Mobile: .....
8. If Employed at present, **8.1. Designation:** .....
- 8.2. Name and Address of Workplace:**  
.....
9. Educational Qualifications: Postgraduate/ Degree / Undergraduate / Diploma /  
Pass in A/L / Sat for A/L Exam / Pass in O/L / Sat for O/L Exam / Pass in Grade 8
10. Other Qualifications: .....
11. Name, Address and Telephone No. of the person to be notified in an emergency:  
.....

I hereby certify that the above particulars are true and correct.

.....  
**Applicant's Signature:**

.....  
**Date**