PERSONAL PROFILE – FOREIGN STUDENT OFFICERS

(Foreign Officers selected to follow the DSCSC Course should fill the Performa below and should e-mail One week prior to the arrival in Sri Lanka).

Photograph
(3.5 cm x 4.5 cm)

1. Number: …… Rank :…….…….....
2. Name in Full:…….....
3. Service: (Army/Navy/Air Force) …….....
4. Country: ……
5. Passport Number: …….....
6. Residential Address: …….
   ……..
7. Telephone Nos/E-mail Residential: ……..
   Mobile: …….
   E-mail:……
8. Date of Birth: ……
9. Nationality:……
10. Religion:…….....
11. Date of enlistment to the respective service:…….…….....
12. The name and place of the Military Academy in which you followed the basic Military Training:
    ……..
13. Duration of the Basic Training: ……
    ……..
14. Date of Commission: ..……
15. Date of promotion to the present rank: ……

16. Military Courses Followed:

a. Local:

Title of the Course (a)	Training Institute (b)	Duration (c)	Year (d)

b. Overseas:

Title of the Course (a)	Training Institute (b)	Duration (c)	Year (d)

17. Appointments held:

Appointment (a)	Location/Headquarter (b)	Duration (Year) (c)

18. Highest Educational Qualification:

……

……

……

……

19. Gallantry Awards if any:……

……

20. **Contact details of respective HQ:**

a. Telephone:……..
b. Email:…….

21. **Marital Status**: …….

22. **Particulars of the Spouse**:

a. Full Name of the Spouse:…….
b. Country:……
c. Date of Birth:……...
d. Nationality:……
e. Religion: ……..
f. Occupation:……...
g. Academic Qualifications: …….
h. Passport Number: …….

23. **Particulars of Children**:

Name (a)	Age (b)	Male/Female (c)	Passport Number (d)

24. **Particulars of Visa**:

a. Officer:

(1) Date of Issue:…… (2) Place of Issue: …….

(3) Type of Visa:…… (4) Validity period of the Visa:….....

b. Spouse:

(1) Date of Issue: …… (2) Place of Issue: …….

(3) Type of Visa: …… (4) Validity period of the Visa:….....

c. Children:

(1) Date of Issue: …… (2) Place of Issue: …….

(3) Type of Visa: …… (4) Validity period of the Visa:….....

d. Children:

(1) Date of Issue: …… (2) Place of Issue: …….

(3) Type of Visa: …… (4) Validity period of the Visa:….....

e. Children:

(1) Date of Issue: …… (2) Place of Issue: …….

(3) Type of Visa: …… (4) Validity period of the Visa:….....

25. If any Family Member suffering from a prolong ailment/physical disability (if accompanying only); give a short description:

…….....

…….....

26. **Any Relative or a Known Person living in Sri Lanka; if so :**

a. Relationship:……

b. Name:……...

c. Address:……

d. Telephone No:……..

27. **<u>Any Other Person Accompanying the Officer who is not an Immediate Family Member; if so</u>:**

a. Name:……..
b. Relationship: (Relative/Servant)……...
c. Country:……..
d. Date of Birth:…….
e. Nationality:…….
f. Religion:…….
g. Passport Number:…….....
h. Visa Particulars:

(1) Date of Issue: …… (2) Place of Issue: ……..
(3) Type of Visa: …… (4) Validity period of the Visa: …….....

28. **<u>Embassy/High Commission in Sri Lanka</u>:**

a. Address:…….
b. Contact Number:……

29. **<u>Flight Schedule of Arrival/Departure</u>:**

a. Port of Embarkation and ETD:…….
b. Flight No:……..
c. Date:…….
d. ETA in Colombo:…….

30. Any additional information that the officer may think necessary to be furnished:……..
……...