**NIB CLEARANCE - INITIAL**

CHECK LIST FOR RECEIVING APPLICATIONS

Name of the Applicant:

Date:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item** | **Yes**  | **No**  | **Remarks** | **Office Use** |
| Duly Completed “Personnel Particulars form” (Original One) |  |  |  |  |
| Copies of the Identity Card for Sri Lankan Applicants |  |  | I.D.No. |  |
| Copies of the Passport, Visa & Police Report **(All Foreign country Applicants)** |  |  | Passport No: |  |
| Signature of the Applicant |  |  |  |  |
| Signature of Head of Training or Accountable Manager & Seal |  |  |  |  |
| 03 Sets of Copies |  |  |  |  |

I hereby certify that the particulars given by me in this application are true and correct.

………………………………………….

(Applicant’s Signature)

* All Copies of Security Clearance forms (03 copies) should be Certified by the Security Clearance forms collecting officer by comparing them to the original one.

The Application and documents received on …………………………………. and Date stamp Placed on each form.

…………………………………..

(Receiving Officer’s signature)

Remarks