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	NAME	RELATIONSHIP							CONTACT NUMBER												

Mother

Lalani Priyalatha

0716699233

17. EMPLOYMENT HISTORY (LAST EMPLOYER FIRST)

EMPLOYER	POSITION HELD	PERIOD
Debug Creative Lab	Associate Software Engineer	1.3 years
Paragon software Lanka	Associate Software Engineer	1.5 years
Antler IT Solution	Software Engineer	1.7 years
CAMMS	Software Engineer	4.5 Months

18. TERTIARY EDUCATION (ACADEMIC)

QUALIFICATION	NAME OF INSTITUTE	DATE AWARDED	GRADE
Bsc In IT	Kotelawala Defense University	2017	3.29 GPA

19. PROFESSIONAL QUALIFICATIONS

QUALIFICATION	NAME OF INSTITUTE / PROFESSIONAL BODY	DATE AWARDED	GRADE

20. DETAILS FOR MEDICAL INSURANCE COVER (ONLY FOR PERMANENT STAFF MEMBERS)

SPOUSE/CHILDREN NAME(S)	RELATIONSHIP TO EMPLOYEE	DOB	NIC	OCCUPATION

21. MEDICAL DECLARATION

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I CERTIFY THAT THE INFORMATION SUBMITTED ABOVE ARE CORRECT AND I AUTHORIZE THE COMPANY TO SEND MY SALARY DIRECTLY IN TO THE ABOVE BANK ACCOUNT NUMBER UNTIL FURTHER NOTICE.

SIGNATURE OF EMPLOYEE