

**QUESTIONNAIRE ON INFORMATION REGARDING  
DESIGN TRAINING FOR ENGINEERS**

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01. PF Number : .....
02. Name with Initials : .....
03. Mr. / Mrs. / Miss : .....
04. Date of Graduation : ..... (Please annex copies of Academic Transcript & Graduation Certificate)
05. Date of Appointment to RDA : ..... ( Please annex a copy of Appointment Letter)
06. Present Office : .....
07. Office T.P. No. : ..... Mobile No: .....
- E-Mail Address: .....
08. Please write down the name of the design office in which you would like to be trained.  
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1. Highways Designs - Sethsiripaya  
2. Bridge Designs - Sethsiripaya  
3. Kandy Designs Office  
4. Kurunegala Designs Office  
5. Rathnapura Designs Office
09. Membership in professional bodies:  
1. Name of the Institution: .....
2. Type of Membership (Associate/ Corporate): .....
3. Membership no: .....
10. Do you follow any M.Sc. / PG. Diploma / M. Phil at present? (Yes / No) .....
11. If your answer is “Yes” please give the following details  
1. Date of Registration: .....
2. Name of University or Institute: .....
3. Details of the course: .....
- .....
4. Expected date of completion: .....

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

**Date:** .....

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**Signature**