

CIVIL AVIATION AUTHORITY OF SRI LANKA
EMPLOMENT STATISTICS

STATISTICS

Name of the Agency

License Number

Address

Please insert the Number of staff presently employed in your agency to the date of signature, with the following categories.

	Category	Permanent Staff			Casual Staff		
		Male	Female	Sub Total	Male	Female	Sub Total
1	Manager(s)						
2	Asst. Manager(s)						
3	Clerk(s)						
4	Receptionists/Telephonists						
5	Ticketing Officers						
6	Peons						
7	Others (Pl. Specify)						
Total							

Signature	
Name of the Informant	
Title	
Contact Number	
Email Address	
Date	

Office Use Only		
Entered to System	Y	N
Date		
Signature		

Name of the Agency			
License Number		CAASL File Reference	

Title Mr./Mrs./Miss.	Name of the Employee	Capacity/Post	Qualifications Ex. Diploma etc.	National Identity Card Number