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|  | **FORM ‘A’**    **Recommendation of the Head of the Institution** |
|  | Recommendation by the Head of the Institution [for Employees of the University System/Government Departments/Corporations and Statutory Board etc.] |
|  | I recommend the application submitted by …………………………………and agree/not agree to release the applicant in case he/she is selected for the post of Medical Officer at the University of Moratuwa.  ………………. …………………  Date Name    ……………………………………  Signature of the Head of Institution      Official Stamp |
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