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இலங்கை ஓய்வூதிய
Sri Lanka Pension

Application for Foreign Pension

2 Certified
4.5cm x 3.5cm Size
Photographs

IDENTIFICATION INFORMATION

Name in Full:

Address (Foreign):

Town/City

Postal Code

Country

Email

Web site

Telephone

Skype

Pension No:

Civil

Widow

Forces

Local Gvt

Teachers (Piriven/Private)

Sex Male ☐ Female ☐

Date of Birth

NIC No. (SriLanka)

Passport No. Expiry Date

PERMANENT RESIDENT INFORMATION

Permanent Resident Card No. (If you have)

Foreign Passport No.

The Date of Migrated

Whether you have dual citizenship Yes ☐ No ☐

Type of the visa

Period of abroad resident

SPOUSE INFORMATION (Please Fill where applicable)

Is he/she alive? Yes ☐ No ☐ Date of Birth

Name in full

National Identity Card No. (Sri Lanka)

Permanent Resident Card No. (If he/she has)

If he/she is living in another place or another country /give details : Country

Address

DETAILS OF DEPENDENTS

	Last Name	First Name	Date of Birth	Sex	Civil Status	E/U/D
1						
2						
3						
4						
5						

E–Employed U–Unemployed D –Disable

Contact details of any relation in Sri Lanka:

Name & Address

Telephone											Mobile Phone											
Email											Skype											

Bank account no. (Special account for Foreign Pensions People's Bank – Queen's Branch, BOC – Metropolitan Branch, Pan Asia Bank – Borella Branch or HNB –Maligawatta Branch)

Month and Year of which the pension drew for last

Note : Please read updated pension Circular 01/2018

Data Entry Form should be supported with following attachments — Attachment check

- 02 photographs in 4.5cm × 3.5 cm
- Photocopies of passport (photograph affixed page, visa proved page and alterations page)
- Certified copy of citizenship or permanent resident card
- Application preferred Bank account
  - Peoples' Bank – Queens Branch,
  - BOC – Metropolitan Branch,
  - Pan Asia Bank – Borella Branch
  - Hatton National Bank – Maligawatta Branch
  - KYC (Know Your Customer) profile form
  - Letter of Consent
- If a Widows' / Widowers' & Orphans' pension, Widows' / Widowers' form

Date :

.....
Signature of the pensioner

I declare that Mr/Mrs.....Placed his/her signature before me this.....day of .....at.....

.....
Signature of Attester
Assistant Director (Foreign Pension ş /
Authorized Officer of the Mission

Name :-
Designation :-
Address :-

Please send above details to reach below address :

Director General of Pensions,
Department Of Pensions,
Maligawatta,
Colombo 10, Sri Lanka.

Telephone : +94 112 327752
Fax : +94 112 386469
E-mail : foreign@pensions.gov.lk
Web : www.pensions.gov.lk

Pensioners resident abroad are advised to furnish this form through Sri Lanka Mission abroad. This Application form must be furnished for all pension types. Failing to send this form will be caused to temporary hold of pension.

This Application can be downloaded by **www.pensions.gov.lk**