



Personal particulars for assessment including character assessment

Form
80

Important – Please read this information carefully before you complete this form. Once you have completed this form we strongly advise that you keep a copy for your records.
This form is to be completed **in English** by applicants who are 16 years of age or over, as requested by the office processing the application.

Integrity of application

The Department of Home Affairs (the Department) is committed to maintaining the integrity of the visa and citizenship programs. Please be aware that if you provide us with fraudulent documents or claims, this may result in processing delays and possibly your application being refused.

Important information about privacy

The *Privacy Act 1988* contains 13 Australian Privacy Principles which regulate the way that the Department collects and handles personal information. Information about how the Department collects, uses and discloses personal information for its key functions can be found in form 1442i *Privacy notice*. More information about the Department's general information handling practices (including form 1442i) can be found in the Department's privacy policy at <https://www.homeaffairs.gov.au/access-and-accountability/our-commitments/privacy>

Please open this form using Adobe Acrobat Reader. Either type (in English) in the fields provided or print this form and complete it (in English) using a pen and BLOCK LETTERS.

Tick where applicable

If you need more space for any answers, give details at *Part T – Additional information*

Part A – Applicant details

1 Please provide your details as they appear in your official documents. For example, passport, identity document, travel document, birth certificate.

Note: If you have one name only, please write it in the 'Family name' field.

Family name
KURUPPU ARACHCHIGE DON

All given names
**RANGANA LAKMAL KURUPPU
ARACHCHI**

Sex Male Female Indeterminate / Intersex / Unspecified

Date of birth Day Month Year **11 04 1990** Day, month and year MUST be provided

Suburb of birth **SE NAPURA**

Town/City of birth **ANURADHAPURA**

State/Province/Region
NORTH CENTRAL

Country **SRI LANKA**

2 Do you ever use a Chinese Commercial Code Number for your names shown in the passport/travel document at Question 1?

No
Yes Chinese Commercial Code Number (in full)

3 Are you of Russian descent?

No
Yes In English, provide your patronymic name

Have you been known by any other name(s)? Include:

- name at birth
- cultural or tribal name or clan/subclan name
- name before or after marriage
- preferred name
- adoptive or foster name
- other spellings of names
- alias or pseudonym

No

Yes Give details in English

Type of name

Family name

Given names

If more than one name, give details at Part T – Additional information

Have you ever had a different date of birth to the one shown at Question 1?

No Day Month Year

Yes Different date of birth

Do you currently have citizenship from any country?

No, I am stateless Give details

Yes How did you gain this citizenship (eg. birth, descent, naturalisation)?

Date you gained this citizenship Day Month Year

Do you hold or have you held citizenship from any other country (including dual citizenships and all previous citizenships)?

No

Yes Country

How did you gain this citizenship (eg. birth, descent, naturalisation)?

When did you have this citizenship?

From Day Month Year to Day Month Year

Note: If you still have the citizenship, write 'CURRENT'.

If more than one country, give details at Part T – Additional information

Do you currently have permanent residency rights in any country other than those declared in Questions 6 or 7?

No

Yes List all other countries

Part B – Passport / Travel document details

9 Do you have a **current** passport or travel document?

No Go to Question 13

Yes Give details

Passport/travel document number

Country of passport/travel document

Date of issue Day Month Year

Is this the original issue date?

No Give original issue date

Day Month Year

Yes

Day Month Year

Date of expiry

Nationality

Place of issue/issuing authority

Name on the document (if the same as Question 1, write 'SAME AS QUESTION 1')

Family name

Given names

0 Do you have any **other current** passport or travel document?

No

Yes Give details

Passport/travel document number

CO48180

Country of passport/travel document

SRI LANKA

Day Month Year

Date of issue

18 04 2018

Date of expiry

16 04 2028

Nationality

SRI LANKAN

Place of issue/issuing authority

COLOMBO

Name on the document (if the same as Question 1, write 'SAME AS QUESTION 1')

Family name

SAME AS QUESTION ONE

Given names

1 Have you ever had any **previous** passports or travel documents (including expired, lost or stolen documents)?

No Go to Part C

Yes

2 What happened to this document (Tick one only)

Expired

Lost/stolen

Other Give details

13 Do you have, or remember, any of the document details?

No

Yes Give as much information as possible

Passport/travel document number

N2787518

Country of passport/travel document

SRI LANKA

Day Month Year

Date of issue

15 03 2011

Date of expiry

15 03 2021

Nationality

SRI LANKAN

Place of issue/issuing authority

COLOMBO

Name on the document (if the same as Question 1, write 'SAME AS QUESTION 1')

Family name

SAME AS QUESTION ONE

Given names

Part C – Identity documents

14 Do you currently have, or have you ever had, any **national identity documents or numbers** (including birth registration numbers, social security cards etc)?

No

Yes Give details

Type of identification document	Country of issue	Identification number shown (if applicable)
RESIDENT IDENTITY	UNITED ARAB EMIRATES	784-1990-1835531-2

Part F – Employment

19 Give details of all employment and unemployment

Employment includes:

- all paid employment
- self-employment/family business
- work experience/internships
- unpaid employment/volunteer work.

Unemployment includes:

- from date of birth up until first employment
- all gaps/breaks between employment
- all gaps between education.

If you are currently **retired** – write 'CURRENTLY RETIRED' in 'Name of business' field and provide details in the 'Your occupation and duties' field.

If you have **never worked** – write your date of birth in the 'Date from' field and 'NEVER WORKED' in the 'Name of business/company' field and provide details in the 'Your occupation and duties' field.

Note: Provide your employment and unemployment history with no gaps in the timeline. If there are gaps, you must provide an explanation at Part T – Additional information.

Date from	Date to		Name of business/company (no abbreviations)	Type of business (eg. government department, bakery)	Your occupation and duties OR if unemployed/retired/never worked, provide details of how you occupied your time and financially supported yourself	Full address of business/company (Building number, street name, suburb, town/city, state/province) (no Post Office box)	Country
	Month	Year					
04 2024	CURRENT		UNEMPLOYED				
08 2023	04	2024	MSC PRIZIOSA PASSENGER SHIP	SHIPPING	BARWAITER	GENÈVE, AVENUE EUGÈNE - PITTARD	SWITZE
03 2021	07	2023	DON'S FOOD RAJARATA TRADERS	RESTAURENT WHOLE SALE AND RETAIL BUSINESS	FAMILY BUSINESS	NO 436, KOTUGODA ROAD, SEEDUWA	SRI LANKA
12 2019	07	2020	AIDA BRIMA PASSENGER SHIP	SHIPPING	BARTENDER	AM STRANDE 3D, ROSTOCK, MV 18055	GERMAN
11 2018	08	2019	AIDA VITA PASSENGER SHIP	SHIPPING	BARWAITER	AM STRANDE 3D, ROSTOCK, MV 18055	GERMAN

Part G – Education

20 Give details of all tertiary education and qualifications

Education/qualifications includes:

- college/vocational schools
- university
- research/thesis
- specialist training
- skill/trade qualifications.

Note: If you are applying for a Refugee and Humanitarian visa, you must provide details of **all** education and qualifications **since birth**.

Date from	Date to	Full name of institution (no abbreviations)	Full name of course or description of research/ Thesis and supervisor details (no abbreviations)	Course status	Campus/address of institution	Country
01	2000	SRI LANKA	CERTIFICATE COURSE IN	Completed <input type="checkbox"/>		
	06	INSTITUTE OF TOUR	RESTAURANT & BAR	Withdraw <input type="checkbox"/>	S. L. I. T. H. M	SRI
	2010	ISM & HOTEL MANAGE- MENT	SERVICE	Currently enrolled <input type="checkbox"/>	ANURADHAPURA	LANKA
				Completed <input type="checkbox"/>		
				Withdraw <input type="checkbox"/>		
				Currently enrolled <input type="checkbox"/>		
				Completed <input type="checkbox"/>		
				Withdraw <input type="checkbox"/>		
				Currently enrolled <input type="checkbox"/>		
				Completed <input type="checkbox"/>		
				Withdraw <input type="checkbox"/>		
				Currently enrolled <input type="checkbox"/>		
				Completed <input type="checkbox"/>		
				Withdraw <input type="checkbox"/>		
				Currently enrolled <input type="checkbox"/>		
				Completed <input type="checkbox"/>		
				Withdraw <input type="checkbox"/>		
				Currently enrolled <input type="checkbox"/>		

Part H – Proposed travel or further stay details

1 Are you currently in Australia?

No

Yes **Go to Question 25**

Proposed travel

2 Why are you travelling to Australia?
Include any relevant dates or events

3 Do you have any proposed or booked travel dates for your journey to Australia?

No

Yes Give details of proposed arrival in Australia

Day Month Year

Arrival date

--

Flight number or vessel details (if known)

--

City of arrival

--

Give details of countries you will visit on your way to Australia
(write 'N/A' if not applicable)

List the towns/cities you will visit during your time in Australia

4 Are you applying for a temporary visa?

No **Go to Part I**

Yes Give details of proposed final departure from Australia

Day Month Year

Departure date

--

Flight number or vessel details (if known)

--

City of departure

--

Give details of countries you will visit after your departure from Australia
(write 'N/A' if not applicable)

▶▶ Now go to Part I

Further stay

25 What is your main reason for remaining in Australia?

For studies

26 List the towns/cities you will visit during your further stay in Australia

27 Give details of your arrival in Australia

Day Month Year

Arrival date

25	05	2024
----	----	------

City of arrival

MELBOURNE

28 Are you applying for a temporary visa?

No **Go to Part I**

Yes

29 Do you have any proposed or booked travel for your departure from Australia?

No

Yes Give details

Day Month Year

Departure date

--

Flight number or vessel details (if known)

--

City of departure

--

Give details of countries you will visit after your departure from Australia
(write 'N/A' if not applicable)

Part I – Address(es) in Australia

10 Are you currently in Australia?

No

Yes **Go to Question 33**

Located outside Australia

11 Do you know any details of the places you will stay during your time in Australia (eg. hotel, friends, relatives)?

No **Go to Part J**

Yes Give the residential address and contact numbers

Note: A post office box is **not acceptable**.

Address (including hotel name and/or unit and building number and street name)

6/13, CARDIGAN STREET,
ST. KILDA EAST

Suburb and town/city

ST KILDA EAST

State or territory **VICTORIA** Postcode **3183**

Telephone numbers

Office hours (Area code)

Mobile/cell **+61 416606 702**

12 Will you stay at any other address?

No **Go to Part J**

Yes Give the residential address and contact numbers

Address (including hotel name and/or unit and building number and street name)

Suburb and town/city

State or territory Postcode

Telephone numbers

Office hours (Area code)

Mobile/cell

If you will stay at any other address(es), give details at *Part T – Additional information*.

▶▶ Now go to Part J

Located in Australia

33 Do you have any other addresses in Australia that have not been declared at Question 17?

No **Go to Part J**

Yes Give the residential address and contact numbers

Address (including hotel name and/or unit and building number and street name)

Suburb and town/city

State or territory Postcode

Telephone numbers

Office hours (Area code)

Mobile/cell

When and in what circumstances did you reside, or stay, at this address?

If you have more than one other address in Australia that has not been declared above or at Question 17, give details at *Part T – Additional information*.

Part L – Military service

17 Have you undertaken any military service?

Military service includes:

- compulsory
- conscription
- military training
- voluntary
- professional.

No Give reasons DID NOT LIKE

Yes Give details in chronological order

Date from			Date to			Country of service	Full name of Unit/ Battalion/Brigade and Unit ID number	Rank	Duties	Country of deployment
Day	Month	Year	Day	Month	Year					

Part M – Employed by intelligence or security agency

18 Are you currently, or have you been employed as an intelligence officer or an agent of an intelligence or security agency?

No

Yes Give details of organisation, role and dates you served

Part N – Visa refusals

19 Have you ever been refused a visa to any country?

No

Yes Give dates of refusal, countries and circumstances of refusal

Part O – Deportations

40 Have you ever been excluded, asked to leave, deported or removed from any country?

No

Yes Give details of dates, countries and circumstances

Part P – Citizenship refusals

41 Have you ever been refused, renounced or rescinded citizenship of any country?

No

Yes Give dates of refusal, countries and circumstances of refusal

Part U – Associate people

42 Do you have a partner?

Partner includes wife, husband, fiancé, boyfriend, girlfriend, significant other and de facto. If **widowed** you must give details for your deceased partner.

No

Yes Give details

(If not living, write 'DECEASED' in 'Country of current residence' column)

Relationship to you	Family name	Given names (include patronymic name)		Any other names (eg. maiden or tribal name)	Sex M/FX	Date of birth			Chinese commercial (if not applicable, write 'DECEASED')	Migrating
		State/Province/Region	Country			Day	Month	Year		
WIFE	MUHANDIRAM RALLAGEUDANI PRIYANGIKA	SRI LANKA	SRI LANKA	06.03.1988	F	06	03	1988	AUSTRALIA	No <input checked="" type="checkbox"/>

43 Do you have children?

Children includes biological or adopted, children from a current or previous marriage, all step-children and deceased children.

No

Yes Give details

(If not living, write 'DECEASED' in 'Country of current residence' column)

Child 1

Relationship to you	Family name	Given names (include patronymic name)		Any other names (eg. maiden or tribal name)	Sex M/FX	Date of birth			Chinese commercial (if not applicable, write 'DECEASED')	Migrating
		State/Province/Region	Country			Day	Month	Year		

Child 2

Relationship to you	Family name	Given names (include patronymic name)		Any other names (eg. maiden or tribal name)	Sex M/FX	Date of birth			Chinese commercial (if not applicable, write 'DECEASED')	Migrating
		State/Province/Region	Country			Day	Month	Year		
										No <input type="checkbox"/>

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex M/F/X	Date of birth Day Month Year	Chinese commercial (if not applicable, write 'DECEASED')

Place of birth		Country	Citizenship(s) and year granted	Country of current residence (if not living, write 'DECEASED')	Migrating No <input type="checkbox"/>
Town/City	State/Province/Region				

Child 4

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex M/F/X	Date of birth Day Month Year	Chinese commercial (if not applicable, write 'DECEASED')

Place of birth		Country	Citizenship(s) and year granted	Country of current residence (if not living, write 'DECEASED')	Migrating No <input type="checkbox"/>
Town/City	State/Province/Region				

Child 5

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex M/F/X	Date of birth Day Month Year	Chinese commercial (if not applicable, write 'DECEASED')

Place of birth		Country	Citizenship(s) and year granted	Country of current residence (if not living, write 'DECEASED')	Migrating No <input type="checkbox"/>
Town/City	State/Province/Region				

Child 6

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex M/F/X	Date of birth Day Month Year	Chinese commercial (if not applicable, write 'DECEASED')

Place of birth		Country	Citizenship(s) and year granted	Country of current residence (if not living, write 'DECEASED')	Migrating No <input type="checkbox"/>
Town/City	State/Province/Region				

If more than 6 children, give details at Part T – Additional information

Parents include biological parents, adopted parents, step parents, legal guardians and deceased parents.

No
 Yes Give details

(If not living, write 'DECEASED' in 'Country of current residence' column)

Parent 1

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex	Date of birth	Country of current residence (if not living, write 'DECEASED')	Chinese commercial (if not applicable, write 'No')
FATHER	KURUPPU ARACHCHIGE DON	GNANAWARDANA		M	23 08 1963		
Town/City		State/Province/Region	Country	Citizenship(s) and year granted			
ANURADHAPURA		NORTH CENTRAL	SRI LANKA	23. 08. 1963		SRI LANKAN	<input checked="" type="checkbox"/>

Parent 2

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex	Date of birth	Country of current residence (if not living, write 'DECEASED')	Chinese commercial (if not applicable, write 'No')
MOTHER	FRANSIS	GEETHANJALEE		F	25 01 1966		
Town/City		State/Province/Region	Country	Citizenship(s) and year granted			
SENAPURA		NORTH CENTRAL	SRI LANKA	SRI LANKAN			<input checked="" type="checkbox"/>

Parent 3

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex	Date of birth	Country of current residence (if not living, write 'DECEASED')	Chinese commercial (if not applicable, write 'No')
Town/City		State/Province/Region	Country	Citizenship(s) and year granted			
							<input type="checkbox"/>

Parent 4

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex	Date of birth	Country of current residence (if not living, write 'DECEASED')	Chinese commercial (if not applicable, write 'No')
Town/City		State/Province/Region	Country	Citizenship(s) and year granted			
							<input type="checkbox"/>

If more than 4 parents, give details at Part T – Additional Information

Siblings include full, half and adopted brothers and sisters.

No

Yes Give details

(If not living, write 'DECEASED' in 'Country of current residence' column)

Sibling 1

Relationship to you	Family name	Given names (include patronymic name)		Any other names (eg. maiden or tribal name)	Sex M/FX	Date of birth			Chinese commercial (if not applicable, write)
		Day	Month			Year			
BROTHER	KURUPPU ARACHCHIGE DON KURUPPU ARACHCHI	RANDIKA LAKMAL			M	14	12	1992	

Place of birth		Citizenship(s) and year granted		Country of current residence		Migrating
State/Province/Region	Country					
NORTH CENTRAL	SRI LANKA	SRI LANKAN	14.12.1992	SRI LANKAN		<input checked="" type="checkbox"/>

Sibling 2

Relationship to you	Family name	Given names (include patronymic name)		Any other names (eg. maiden or tribal name)	Sex M/FX	Date of birth			Chinese commercial (if not applicable, write)
		Day	Month			Year			
BROTHER	KURUPPU ARACHCHIGE DON KURUPPU ARACHCHI	RACHITHA LAKMAL			M	11	12	1994	

Place of birth		Citizenship(s) and year granted		Country of current residence		Migrating
State/Province/Region	Country					
NORTH CENTRAL	SRI LANKA	SRI LANKAN	11.12.1994	JAPAN		<input checked="" type="checkbox"/>

Sibling 3

Relationship to you	Family name	Given names (include patronymic name)		Any other names (eg. maiden or tribal name)	Sex M/FX	Date of birth			Chinese commercial (if not applicable, write)
		Day	Month			Year			

Place of birth		Citizenship(s) and year granted		Country of current residence		Migrating
State/Province/Region	Country					
						<input type="checkbox"/>

Sibling 4

Relationship to you	Family name	Given names (include patronymic name)		Any other names (eg. maiden or tribal name)	Sex M/FX	Date of birth			Chinese commercial (if not applicable, write)
		Day	Month			Year			

Place of birth		Citizenship(s) and year granted		Country of current residence		Migrating
State/Province/Region	Country					
						<input type="checkbox"/>

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex M/F/X	Date of birth Day Month Year	Chinese commercial (if not applicable, write
Place of birth		Citizenship(s) and year granted		Country of current residence		Migrating
Town/City	State/Province/Region	Country				No <input type="checkbox"/>

If more than 5 siblings, give details at Part T – Additional information

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Other travelling family members

Are there **any other family members** included in the visa application?

Family members include nieces, nephews, cousins, in-laws, grandparents etc. who are **travelling with you**

No

Yes Give details

Family member 1

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex M/F/X	Date of birth Day Month Year	Chinese commercial (if not applicable, write
Place of birth		Citizenship(s) and year granted		Country of current residence		
Town/City	State/Province/Region	Country				

Family member 2

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex M/F/X	Date of birth Day Month Year	Chinese commercial (if not applicable, write
Place of birth		Citizenship(s) and year granted		Country of current residence		
Town/City	State/Province/Region	Country				

If more than 2 other family members, give details at Part T – Additional information

Parents include biological parents, adopted parents, step parents, legal guardians and deceased parents.

No

Yes

Give details

(If not living, write 'DECEASED' in 'Country of current residence' column)

Parent 1

Relationship to you FATHER	Family name KURUPPU ARACHCHIGE DON GINANAWARDANA	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex M/F/X M	Date of birth Day Month Year 23 08 1963		Chinese commercial (If not applicable, write
	Place of birth State/Province/Region ANURADHAPURA NORTH CENTRAL SRI LANKA	Country SRI LANKA	Citizenship(s) and year granted 23. 08. 1965			Country of current residence (If not living, write 'DECEASED')	Migrating No <input type="checkbox"/>

Parent 2

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex M/F/X	Date of birth Day Month Year		Chinese commercial (If not applicable, write
	Place of birth State/Province/Region	Country	Citizenship(s) and year granted			Country of current residence (If not living, write 'DECEASED')	Migrating No <input type="checkbox"/>

Parent 3

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex M/F/X	Date of birth Day Month Year		Chinese commercial (If not applicable, write
	Place of birth State/Province/Region	Country	Citizenship(s) and year granted			Country of current residence (If not living, write 'DECEASED')	Migrating No <input type="checkbox"/>

Parent 4

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex M/F/X	Date of birth Day Month Year		Chinese commercial (If not applicable, write
	Place of birth State/Province/Region	Country	Citizenship(s) and year granted			Country of current residence (If not living, write 'DECEASED')	Migrating No <input type="checkbox"/>

If more than 4 parents, give details at Part T – Additional information

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex M/F/X	Date of birth Day Month Year	Chinese commercial (if not applicable, write
Town/City	Place of birth State/Province/Region	Country	Citizenship(s) and year granted		Country of current residence (if not living, write 'DECEASED')	Migrating No <input type="checkbox"/>

Child 4

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex M/F/X	Date of birth Day Month Year	Chinese commercial (if not applicable, write
Town/City	Place of birth State/Province/Region	Country	Citizenship(s) and year granted		Country of current residence (if not living, write 'DECEASED')	Migrating No <input type="checkbox"/>

Child 5

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex M/F/X	Date of birth Day Month Year	Chinese commercial (if not applicable, write
Town/City	Place of birth State/Province/Region	Country	Citizenship(s) and year granted		Country of current residence (if not living, write 'DECEASED')	Migrating No <input type="checkbox"/>

Child 6

Relationship to you	Family name	Given names (include patronymic name)	Any other names (eg. maiden or tribal name)	Sex M/F/X	Date of birth Day Month Year	Chinese commercial (if not applicable, write
Town/City	Place of birth State/Province/Region	Country	Citizenship(s) and year granted		Country of current residence (if not living, write 'DECEASED')	Migrating No <input type="checkbox"/>

If more than 6 children, give details at Part T – Additional information

7 Do you have any personal contacts in Australia?

Personal contacts include visa sponsors, any relatives, friends, family members and acquaintances in Australia.

No Go to Part R

Yes Provide as much information about one of your personal contacts as possible

Family name

Given names

Sex Male Female Indeterminate / Intersex / Unspecified

Relationship to you (eg. partner, sister, aunt, friend)

Date of birth Day Month Year

Town/City of birth

State/Province/Region

Country

Nationality

Your personal contact's current residential address

Note: A post office box is not acceptable.

Address (including building/unit/house number and street name)

Suburb and town/city

State or territory

Postcode

Telephone numbers

Office hours

(Area code)

Mobile/cell

Email address

48 Do you have any other personal contacts in Australia?

No Go to Part R

Yes Give details

Family name

Given names

Sex Male Female Indeterminate / Intersex / Unspecified

Relationship to you (eg. partner, sister, aunt, friend)

Date of birth Day Month Year

Town/City of birth

KEGALLE

State/Province/Region

Country

SRI LANKA

Nationality

SRI LANKAN

Your personal contact's current residential address

Note: A post office box is not acceptable.

Address (including building/unit/house number and street name)

Suburb and town/city

State or territory

VICTORIA

Postcode

3183

Telephone numbers

Office hours

(Area code)

Mobile/cell

+61 405 939 738

Email address

UDANI.2007MUHANDIRAM@GMAIL.COM

Give details of all other contacts at Part T - Additional information

Part R – Sponsoring employer details

9 Are you being sponsored by, or associated with, a business or organisation in Australia?

No ► **Go to Part S**

Yes ► Give details

Organisation/Business name

Organisation/Business description

Organisation/Business commercial address (including building number and street name)

Suburb and town/city

State or territory

Postcode

Name of contact person in business/organisation

10 Does the employer/business have any other associated addresses?

No

Yes ► Give details

Type of address (eg. head office, factory, retail store)

Address (including building number and street name)

Suburb and town/city

State or territory

Postcode

11 Does the employer/business have an email address?

No

Yes ► Give details

12 Does the employer/business have telephone numbers?

No

Yes ► List all contact telephone numbers (including area code)

Part S – Declaration

WARNING: Giving false or misleading information is a serious offence.

53 I declare that:

- the information I have supplied in or with this form is complete, correct and up-to-date in every detail.
- I have read and understand the information supplied to me.
- I have read the information contained in form 1442i *Privacy notice*.
- I understand the Department may collect, use and disclose my personal information (including biometric information and other sensitive information) as outlined in form 1442i *Privacy notice*.

Signature of applicant



Day Month Year

Date 25 03 2026

We strongly advise that you keep a copy of your application and all attachments for your records.

