DEPARTMENT OF CHRISTIAN RELIGIOUS AFFAIRS DOCUMENTARY FILM COMPETITION - 2026

APPLICATION FORM

PLEASE FILL THIS FORM ONLY IN ENGLISH

01. Applicant's Information (Individual or Team Leader)

- Full Name : .....
- National Identity Card (NIC) No: .....
- Date of Birth: .....
- Permanent Address: .....
- Telephone No. (WhatsApp): ..... Email Address: .....

02. Nature of Participation

- [ ] Individual
- [ ] As a Team

03. Information Regarding the Documentary Film

- Name of the Church: .....
- District: .....
- Intended Language of Production : Sinhala [ ] Tamil [ ]

04. Participation in the Special Workshop

- Would you / your team like to participate in the workshop on documentary film production? } Yes [ ] No [ ]
- Most convenient district to attend the workshop: .....

05. Applicant's Declaration and Signature

I hereby certify that I agree to all the rules and regulations of this competition and that the information regarding the documentary film presented by me will be submitted certified by the Parish Priest.

Applicant's Signature ..... Date .....

06. Parish Priest's Recommendation

The above-mentioned applicant/team has requested permission to produce a documentary film regarding our church, and I hereby express my agreement/recommendation for the same.

.....
Parish Priest's Signature and Official Stamp