දුරකථන	0112669192 ,0112675011
 தொலைபேசி	0112698507, 0112694033
Telephone	0112675449 ,0112675280
ෆැක්ස්) 0112693866
பெக்ஸ்) 0112693869
Fax)0112692913
විදයුත් තැපැල ගින්නාஞ්சல් முகவரி)postmaster@health.gov.lk
e-mail)
වෙඩි අඩවිය) www health gov lk

இணையத்தளம்



සෞච්‍ය හා දේශීය වෛදය සේවා අමාතසාංශය சுகாதாரம் மற்றும் சுதேச வைத்திய சேவைகள் அமைச்சு Ministry of Health & Indigenous Medical Services

General Circular Letter No - 02 - 39/2020

Deputy Diector General – Sri Lanka National Hospital All Hospita Directors under Line Ministry Medical Superintendents, Heads of th Departments

Second Efficiency Bar Examination for in Field Officer/in Office Officers Segment 2 Service Category (MN - 05 - 2006 A) in the Ministry of Health and Indigenous Medical Services - 2020 (1st Term)

It is hereby notified that the Second efficiency bar examination for inField/in Office Officers segment 2 service category(MN 05 - 2006 -A) of the Ministry of Health and Indigenous Medicine which should be passed before expiry of promotion 05 years after to **Grade I** will be held on **12.09.2020** in the media of Sinhala, Tamil and English. Venue and the time of the examination will be mentioned on the admission card.

02. Qualifications:

The officers who have obtained a Grade I appointment a post of in Field Officer /in Office Officers Segment 2 Service category (MN -5 - 2006 A) of Ministry Of Health and Indigenous Medicine (Nutritionist, Psycatric Social Workers, Planning and Program Officer, Medical Record Officer, Statistic Survey Officer, Perfussionists) and have not yet completed this examination, are only eligible to apply for this examination.

N.B Only the Applicants Who have received Grade 1 appointments before .30.07.2020 Should apply for this examination

03. Applications:

Applications prepared by the candidates in accordance with the specimen form of application appended at the end of this circular should be sent by registered post to reach Director (Examinations) Suwasiripaya, No.385, Rev.BaddegamaWimalawansa Thero Mawatha, Colombo 10 on or before .30.07.2020 through the respective Head of Institution. The accuracy of the particulars furnished in each application should be certified by the Head of Division. A Two addressed envelope (Official or private address) in the size of 9"x4" inches, affixed withstamps to the value of Rs. 45.00 should be sent along with the application. Applications which are late" incomplete or inaccurate will be rejected.

N.B. The Applications should be prepared using a paper of A4 size in such a way that the No. 01 to 03 appear on the 1st page while the Nos. 04 to 08 appear on the 2nd page. Applications that do not comply with the specimen will be rejected without notice.

04. Examination Fees:

- I. Candidates who sit for the examination for the first time are exempted from paying examination fees. Other candidates should affix stamps to the value of Rs. 25/= per subject in the application and cancel the same by placing his/her signature.
- II. The examination fees paid will not be transferred to any other examination or refunded under any circumstance.

05. Admission to the Examination:

- Admission cards are issued to the candidates whose applications are accepted. The admission card should be duly completed and submitted to the supervisor of the examination centre. Otherwise, it will not be allowed to sit for the examination.
- II. Candidates should prove their identity to the Supervisor at the Examination Hall. For this purpose, one of the following documents will be accepted.
 - a) National Identity Card
 - A Formal Identity card issued by the Ministry of Health and Indigenous Medical Service
 or a relevant institution
 - valid Driving License
 - d) Valid Passport

06. Scheme Of The Examination

This examination consists of an essay type written question paper named "Case Study". Four questions out of seven question should be answerd. Duration is 03 hours and total marks given 100. 40 marks should be obtained in minimum to pass the examination. The examination can be completed at one sitting or at several sittings. At the first attempt officer should apply for all relevant subjects.

07. Syllabus of the Examination:

Case Study

Candidates are required to answer several questions based on one or more problematic cases created relevant to the field concerned which will test their logical thinking, creativity, skill in analyzing the problem, ability to take correct decisions and ability to apply theoretical knowledge practically.

08. Regulations Related to Examination Procedure

Candidates are warned against copying or attempting to copy from the script of another candidate or from any book or paper or notes whatsoever. No candidate should attempt to look at the script of another candidate and should not help any candidate either help another candidate or obtain help from another candidate or person. Further Mobile phones & the similar electronic equipments should not be used. Any candidate who disregards this rule is liable to punishment.

09. Please bring the contents of this circular to the notice of in Field Officer / in office officers in Gradel ((Nutritionist, Psycatric Social Workers, Planning and Program Officer, Medical Record Officer, Statistic Survey Officer, Heart Lungs Perfussionists) who are serving in your Division/Specialized Campaign/Institution/ Hospital.

(This information can also be obtained from the web site - www.health.gov.lk)

N.B.: Sinhala medium notification on examination will be effected if any contradictory is arisen in the examination notification published in Sinhala, Tamil and English medium.

Donald Murage

Deputy Director General (Admin) II linistry of Health, Nutrition & Indigenous Medicine

Ministry of Health, Nutrition & Indigenous Medicine "Suwasiripaya"

385, Rev. Baddegama Wimalawansa Thero Mawatha.

Colombo 10. Ministry o

Donald Murage

Deputy Director General (Admin II)

For Secretary

Ministry of Health & Indigenous Medical Services

EXP

03.

Specimen Form of Application

For	Office	use	only

Secound Efficiency Bar Examination for in Field /in Office Officers Segment 2 Service Category

(MN - 05 - 2006 A) in the Ministry of Health and Indigenous Medical Services - 2020(1st Term)

01.	(a)	Name of the Applicant (Sinhala/Tamil):	
	(ii)	lame of Applicant (In English block letters)	
	(iii)	James denoted by initials (in Sinhala/ Tamil)	
	(iv)	Names denoted by initials (In English block letters)	
(b)	(i)	'ost :	
	(ii)	Date of appointment to the present post:	
	(iii)	Present annual salary:	
	(iv)	Date of promotion to Grade I	
	(v)	Mobile phone number	
	(vi)	National Identity Card number	
02.	(a)	resent Station: (In Sinhala)	.e
		(In English)	,0 <u>1</u> 0
	(b)	The Working Station Administrate by :- Line Ministry Provincial Council	
	(c)	District of the station	
(d)		a self-addressed two envelopes in the size of 9"x4" inches with stamps affixed to the Rs. 45.00 has been attached to the application to post the Admission Card	

(e)	(i)	Postal Address (In Sinhala)	***
	(ii)	Postal Address (In Block Capitals)	••
. N	1edium i	which you sit for the examination(Sinhala/English/Tamil)	0

(b) if the application is forwarded not for the first time whether stamps affixed
	Stamp Cage
`05.	Certification of the Candidate:
05.	2
	I. I do hereby certify that the particulars furnished in this application are true and correct to my knowledge and I need not affix stamps since I sit the Examination for the first time / have affixed
	stamps to the value of RS 45.00.since I sit the Examination not for the first time, and the stamps affixed are unused
	And genuine.
	II. I do hereby agree to comply with the rules and regulations imposed on examination and I do
	agree to comply with my decision to cancel my candidature if I' decided disqualified accordance in until the minute of the Examination.
	Date:
06.	Certification by the Management Assistant in charge of personal files
	I certify that Mr./Mrs/Miss has correctly handed over me the duly filled
	application before the closing date and particulars furnished in this application are true and accurate as per
	the personal file and kept a copy of this application attached to the personal file.
	Date:
	Name and Signature
(canada	8
07.	Certification of Head of Institution:
	I certify that Mr./Mrs/Miss serves as a in this
	institution, and the particulars furnished by him/her in the application are correct in accordance with the
	particulars available in his/her personal file, and he/she sit the examination for the first time and he/she is
	eligible to sit for the examination and he/she placed his/her signature in my presence.
	Date:
	Signature of the Head of Institution
	(Rubber Stamp)
08.	Certification of the Head of Decentralized Unit Specialized Campaign.
	I certify that Mr./Mrs/Miss serves as a in my Unit/
	Campaign and particulars furnished in the application are correct in accordance with the particulars
	available in the personal file of the candidate and he/she is eligible to sit for this examination.
	Date:
	Signature of the Head of the
	Decentralized Unit/Specialized Campaig

(Rubber Stamp)