

NOTICE

Calling for applications: Training Programme on Capacity Development for Administrative Officers/Hospital secretaries in Health Sector.

Applications are hereby called from Administrative Officers/Hospital secretaries attached to Ministry of Health & Indigenous Medicine and all health institutions under line ministry, to follow a Training Programme on Capacity Development.

The training will be of maximum **one-week** duration and, will be held in Sri Lanka (1-2 days) and in a foreign country (5-6 days).

Number to be selected -22

Process of selection: Selection would be through a two step- process.

Step 1- Short-list candidates who fulfil the prerequisites

Step 2- Selection of 22 candidates from the shortlisted candidates, through an interview process conducted by Education, Training & Research unit of the Ministry of Health.

Prerequisites:

1. Administrative Officers/Hospital Secretaries attached to Ministry of Health & Indigenous Medicine and all health institutions under line ministry are eligible to apply
2. The candidate should be physically and mentally fit to undertake a training in a foreign country

Applications should be forwarded to Deputy Director General (Education, Training & Research), Ministry of Health, Nutrition & Indigenous Medicine, No.385, Rev. Baddegama Wimalawansa Thero Mawatha, Colombo 10, through proper channels on or before 08/07/2019 by filling the specimen application form attached.

Deputy Director General
(Education, Training & Research)

Application Form- Training Programme on Capacity Development for Administrative Officers/Hospital secretaries in health sector.

1. Full name of the applicant

2. Name with initials

3. Current place of work

4. National Identity card number (Please attach a certified copy of the NIC)

5. Contact details of the applicant

Office address	
Office phone number	
Office fax number	
Residence address	
Residence phone number	

Mobile	
Email	

6. Date of Birth of the applicant (Please attach a certified copy of the birth certificate)

Date	Month	Year

7. Age as at 1st June 2019

Days	Months	Years

8. Date of appointment as an Administrative Officer/Hospital Secretary

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9. Previous working places in a chronological order

Place	Period	
	From	To

10. Special activities/programmes carried out for uplifting of health services

- I. _____
- II. _____
- III. _____
- IV. _____
- V. _____

11. Any other special claims

- I. _____
- II. _____
- III. _____
- IV. _____

12. Details of fellowships received previously

	Programme	From	To	Country
1				
2				
3				
4				

Declaration of the candidate

- 1. I certify that, above particulars furnished by me are true & correct.
- 2. I am of good physical and mental health to undertake the training in a foreign country

Date-----

Signature of the applicant-----

Recommendation of the Head of the Institution

Recommended/Not Recommended

I certify that, above particulars given in the application are true and correct. He/she can be released for the training programme full time if selected.

Date-----

Signature & the stamp of the Head of the Institution-----