



VACANCY NOTICE

The Mission of WHO is the attainment by all peoples of the highest possible level of health

Vacancy Notice No: WCO-SRL-2019/03

Date: 11 April 2019

Title: **Administrative Assistant**

Deadline for application : 25 April 2019

Contract type: **Special Services Agreement**

Grade: - G2 – Step 1

Duration of contract: Initially 08 months (may be extended)

Organization unit: Country Office for Sri Lanka

Introduction:

The World Health Organization is the United Nations Specialized agency for health established on 7 April 1948. WHO was one of the first United Nations agencies in Sri Lanka (1952) and over sixty years on, WHO remains a steadfast intergovernmental organization committed to supporting the people of the country to attain the highest level of health through the strengthening of the health system on the principles of equity, fairness and responsiveness with emphasis on the poor and marginalized.

Our goal

"To support the people of the country to attain the highest level of health through strengthening of the health system on the principles of equity, fairness and responsiveness with emphasis on the poor and marginalized."

Our core functions

- Providing leadership on matters critical to health and engaging in partnerships where joint action is needed
- Shaping the research agenda and stimulating the generation, translation and dissemination of valuable knowledge
- Setting norms and standards, and promoting and monitoring their implementation
- Articulating ethical and evidence-based policy options
- Providing technical support, catalysing change, and building sustainable institutional capacity
- Monitoring the health situation and assessing health trends

Objectives of the Contract:

Objectives of the program is to support work in relation to the technical areas

Job Description:

Under the general supervision of the Public Health Administrator and the direct supervision of the Administrative Officer, the incumbent will work to:

- 1) Overall Coordination with Ministry of Health, Nutrition and Indigenous Medicine (MoH) at the Director General of Health Services Office for WHO activities related to Universal Health Coverage (UHC) and Governance on Health System Development, Planning and Monitoring
- 2) Monitoring of Implementation of the WHO activities;
 - a) Assessing the protocols of proposals before being submitted to WHO Country office
 - b) Maintaining a register of the WHO activities undertaken with MoH
 - c) Coordination of the organizing of review meetings
- 3) Assist and coordinate joint review meetings of WHO -MoH activities, particularly on UHC, Framework of the Sustainable Development of Health in Sri Lanka and Health System in Transition review for Sri Lanka
- 4) Support in coordination and communication with other MoH Units/Directorates on meeting related to PHC strengthening including meetings with other development partners
- 5) Assist in organizing meetings for the biennial planning process of MoH and WHO for 2020/2021

Required Qualifications:**Education:**

Essential: Completion in Secondary School education

Desirable: Training in Secretarial practices

Experience:

Essential: At least three (3) years' experience in secretarial/clerical/administrative work

Desirable: Experience in the Government Sector and or another UN/International Organization would be an advantage

Language Skills:

Expert knowledge of English and expert knowledge of local language

Skills:

Through knowledge of modern office procedures and practices. Ability draft standard correspondence; ability to handle work in a timely and accurate manner with tact and discretion, as required. Ability to maintain and update knowledge in the use of office technology through on-the-job training and/or self-training.

Competencies:

- Teamwork
- Communication
- Respecting and promoting individual and cultural differences
- Producing Results

Annual Salary & others Benefits:

Annual Salary

- General Services Grade 2 – Step 1

Others Benefits

WHO Offers locally competitive packages such as:

- Health Insurance; Accident and illness insurance;
- Annual Leave (30 days per year)
- Sick leave (7 days per year)
- WHO Holidays


NOTE:

- 1) Qualified Candidates will be evaluated and interviewed
- 2) Applicants should send a brief Resume of their relevant experience, explaining reasons for being suitable of the activity, together with duly completed Personal History Form (PHF) and scanned copies of educational certificates.
- 3) Please send your applications only via email to: ragelk@who.int
- 4) We regret that due to large volume of applications normally received, applications cannot be acknowledged individually.
- 5) This is vacancy is open to Sri Lankan Nationals (all genders). *Qualified female candidates are encouraged to apply*
- 6) This Vacancy Notice may be used to fill other similar positions at the same grade/level

"WHO is committed to workforce diversity". "Any attempt to unduly influence WHO's selection process will lead to automatic disqualification of the applicant."



WHO has a smoke-free environment and does not recruit smokers or other tobacco users


Dr Olivia Corazon Nieveras
Public Health Administrator



Attach recent photograph here	<p style="text-align: center;">IMPORTANT</p> <p>Please answer each question completely. Type or print in dark ink. All relevant information should be included on this form, but if necessary additional pages of similar size may be attached. You may be requested to supply documentary evidence supporting the statements below. Do not attach any such documents now.</p> <p>If your qualifications meet the Organization=s needs, this form will be retained in our active files for two years. Please keep us advised of any changes in address during this period.</p>	Do not write in this space Date received:
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1 Family name (surname)	First/other names	Title	Sex	Maiden name if any
Present nationality	Date of birth:	Day	Month	Year
	Place and country of birth			
Has your nationality ever been changed or is it in the process of being changed?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (explain)			
Address to which correspondence should be sent			Telephone/Mobile	
			Fax	
			e:Mail	

2 For what type(s) of work do you wish to be considered?	If you apply for a vacancy announcement state no. or reference
Check period(s) of employment you would accept	<input type="checkbox"/> Fixed-term (one year or more) <input type="checkbox"/> Temporary (less than one year)
Employment by an international Organization may require assignment and travel to any area. If you have any disabilities or reservations which may restrict your activities in this respect, give details. Employment is subject to medical examination.	

3 EDUCATION Give full details in chronological order. Give the exact name of the institution and title of degrees/certificates in the original language. Exclude primary/secondary school if you have a university degree or equivalent. Include courses and postgraduate studies in your professional or related field and all training and qualifications in teaching/learning methodology.				
From Month/year	To Month/year	Institution (name, place)	Certificates, degrees obtained	Main field(s) or subject(s) of study

4 LANGUAGE AND COMPUTER SKILLS					
Mother tongue:		For languages <u>other than mother tongue</u> , enter appropriate number from code below to indicate level of your language knowledge:			
CODE	Languages	Read	Write	Speak	Understand
1 Limited conversation, reading of newspapers, routine correspondence.					
2 Engage freely in discussions, read and write more difficult material.					
3 Speak, read and write (nearly) as in mother tongue.					
List computer skills		For clerical positions only: Indicate speed in words per minute			
		English		French	Other languages
		Typing			
		Shorthand			

5 EMPLOYMENT RECORD Starting with your present or most recent post, list in reverse order positions held. Attach additional pages if necessary.

PRESENT OR MOST RECENT EMPLOYMENT

5.1 Period (Month/Year)		Total annual professional income		Exact title of your post/duty station
From	To	Starting	Most recent	

Give details of substantial allowances or fringe benefits (if any)	Number and type of employees supervised by you, if any
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Name and address of employer	Name and title of supervisor
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Reason for wishing to change employment

Description of your duties and responsibilities

Have you any objections to our making inquiries of your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you now in Government employ? <input type="checkbox"/> Yes <input type="checkbox"/> No
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If you are offered an appointment, how soon thereafter can you report for duty?

5.2 Period (Month/Year)		Total annual professional income		Exact title of your post/duty station
From	To	Starting	Final	

Give details of substantial allowances or fringe benefits (if any)	Number and type of employees supervised by you, if any
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Name and address of employer	Name and title of supervisor
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Reason for leaving

Description of your duties and responsibilities

5.3 Period (Month/Year)		Exact title of your post/duty station	Number and type of employees supervised by you, if any
From	To		
Name and address of employer		Name and title of supervisor	
Reason for leaving			
Description of your duties and responsibilities			

5.4 Period (Month/Year)		Exact title of your post/duty station	Number and type of employees supervised by you, if any
From	To		
Name and address of employer		Name and title of supervisor	
Reason for leaving			
Description of your duties and responsibilities			

5.5 Period (Month/Year)		Exact title of your post/duty station	Number and type of employees supervised by you, if any
From	To		
Name and address of employer		Name and title of supervisor	
Reason for leaving			
Description of your duties and responsibilities			

6 Length of stay at present place of residence	in country	Marital status <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Widow(er) <input type="checkbox"/> Separated		
	in city			

7 Give names of spouse and any dependants					
Name	Date of birth	Relationship	Name	Date of birth	Relationship

Give details of any near relatives who are employed by WHO or other international organizations.		
Name	Relationship	International Organization

8 If you have ever been found guilty of the violation of any law (except minor traffic violations) give full particulars	
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9 REFERENCES List three persons not related to you who are familiar with your character and qualifications. Do not repeat names of supervisors listed under "Employment record".		
Name	Full address (telephone, fax, e:Mail if known)	Occupation, business, title

10 State any additional skills and relevant facts which might help to evaluate your application	
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If you are now holding or if you have held a fellowship, state place, date and duration of fellowship, and by whom awarded.	
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Can a copy of your personal history form be transmitted to:
<input type="checkbox"/> other UN Org. <input type="checkbox"/> national govt. (including yours) <input type="checkbox"/> other

- ATTACH LIST OF YOUR SIGNIFICANT PUBLICATIONS OR PAPERS IN YOUR PROFESSIONAL FIELD AND NAMES OF JOURNAL, ETC. IN WHICH THEY APPEARED (DO NOT ATTACH THE PUBLICATIONS THEMSELVES). -ATTACH LIST OF PROFESSIONAL SOCIETIES OF WHICH YOU ARE A MEMBER AND ACTIVITIES IN CIVIL, PUBLIC OR INTERNATIONAL AFFAIRS

11 I certify that the statements made by me on this form are true, complete and correct. I understand that any false statement or required information withheld may provide grounds for the withdrawal of any offer of appointment or the cancellation of any contract of employment with the Organization.	
Date and place	Signature
Home address (if different from address as given on page 1)	Telephone/Mobile Fax e:Mail