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சுவசிரிபாய

SUWASIRIPAYA

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எனது இல)
My No.) CF/EXD/01/2020

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Your No. :)

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திகதி) 07-01/2020
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சுகாதாரம் மற்றும் சுதேசவைத்தியச் சேவைகள் அமைச்சு
Ministry of Health and Indigenous Medical Services

General Circular Letter No: 01-04/2020

Provincial Health Secretaries,

Deputy Director General National Hospital of Sri Lanka,

Provincial Directors of Health Services,

All Hospital Directors Under the Line Ministry,

Regional Directors of Health Services,

Heads of Departments.

**First Efficiency Bar Examination for the Prosthetist and Orthotist Grade III
Service Category (MT-6) of the Ministry of Health and Indigenous Medical Services –
2020 (1st Term)**

It is hereby notified that the Departmental Examination and Efficiency Bar Examination which should be passed by Prosthetist and Orthotist Grade III before reaching the third salary step of the salary scale relevant to Grade III, will be held on **23.02.2020** respectively in the media of Sinhala, Tamil and English. The place and the time of examination will be notified in the admission card.

02. Qualifications

Officers who have been appointed to a post of Prosthetist and Orthotist Grade III and Prosthetist and Orthotist tutor Grade III are only eligible to apply for this examination.

03. Applications

Applications prepared by the candidates as per specimen appended to this circular should be sent under registered cover to reach the Director (Examinations) "Suwasiripaya" No.385, Ven. Baddegama Wimalawansa Thero Mawatha, Colombo 10, on or before **23.01.2020** through the respective Head of Institution. The Head of Division should certify the accuracy of contents in each application. Two self addressed envelopes (Candidates can write their official or private address) in the size of 9" x 4" inches, affixed with stamps to the value of Rs. 45.00 should be sent along with the application. Applications which are received late, incomplete or inaccurate will be rejected.

Note : The application should be prepared using a paper of size A4 in compliance with the specimen form of application so as to appear from 01 to 04 on the first side of the page and from 05 to 09 on the second side of the page. Applications which do not conform to above format will be rejected without any notice.

04. Examination fees:-

- I. Candidates who sit the examination for the first time need not pay examination fees. However in every subsequent sitting they should affix stamps to the value of Rs. 25/= per subject in the application and cancel the same by placing their signature and the date.
- II. The fees once paid will not be allowed to transfer for any other Examination or refunded for any reason.

05. Admission to the Examination:-

- I. Candidates whose applications are accepted will be issued with Admission Cards. The Admission card should be duly completed and submitted same to the Supervisor at the examination centre. Otherwise they will not be allowed to sit 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
 - (b) A Formal identity card issued by the Ministry of Health and Indigenous Medical Services or a relevant institution
 - (c) Valid Driving License
 - (d) Valid Passport

06. Scheme of the Examination:-

Efficiency Bar Examination consist two Essay type Questions papers viz. Establishments Code, Public Service Commission rules and Financial Regulations. Time 03 hours. Each paper is given 100 marks. Minimum 40 marks should be obtained for each subject to pass the examination. the examination can be completed in one or several sittings. Applicants who sit for the examination for the first time should apply for all subjects.

07. Syllabus of the Examination

7.1 Establishments code and the Procedural Ruler of the Public Service Commission

This Question Paper will be Prepared based on the following chapters of the Establishments code and the Procedural Ruler of the Public Service Commission. Time 03 hours. The question paper will have 08 Essay type questions and candidates are required to answer any 05 question out of them

1. Questions will be based on following chapters of the Establishment Code.

- | | | |
|----------------|---|--|
| Chapter IV | - | Monthly payments Temporary status payments status and Pensionability |
| Chapter XII | - | Leave |
| Chapter XIII | - | Railway warrants |
| Chapter XIV | - | Travel on duty within the island |
| Chapter XIX | - | Government Quarters. |
| Chapter XLVII | - | General conduct and Discipline |
| Chapter XLVIII | - | Disciplinary procedure. |

2. Public Service Commission rules

07.1.2 Financial Regulations.

Time 03 hours. The question paper will have 08 Essay type questions and candidates are required to answer any 05 question out of them

Questions will be based on following chapters.

- Chapter I - Estimates of Expenditure and Revenue.
(F.R. 01 - 68)
- Chapter III - Financial Management and Accountability
(F.R. 124 - 147)

08. To follow the 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 equipment's 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 all officers serving in your Division/ Specialized Campaign/ Institution. The information is also available on 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 notifications published in Tamil and English mediums.



Donald Murage
Deputy Director General (Admin) II
For Secretary
Ministry of Health and Indigenous Medical Services

Donald Murage
Deputy Director General (Admin) II
Ministry of Health, Nutrition & Indigenous Medicine
"Suwasiripaya"
385, Rev. Baddegama Wimalawansa Thero Mawatha,
Colombo 10.

EXD

First Efficiency Bar Examination for the Prosthetist and Orthotist

Service Category (MT-6) of the Ministry of Health and Indigenous Medical Services – 2020 (1st Term)

01. (a) i. Full Name of the Applicant (In Sinhala / Tamil) :
- ii. Full Name of the Applicant (In English block letters)
- | | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
- iii. Names with initials (In Sinhala / Tamil) :
- iv. Names with initials (In English block letters)
- | | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
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| | | | | | | | | | | | | | | | | | | | |
- (b) i. First appointment date :-
- ii. Present Annual Salary :-
- iii. National Identity cardNo :-
- | | | | | | | | | | | | | | | | | | | | |
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|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
- iv. Mobile No :-
- | | | | | | | | | | | | | | | | | | | | |
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|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
02. Mark “√” within the cages against the subjects you wish to sit in this time and Mark “X” against the subjects for which you do not wish to sit for.
- Office Procudure & Establishments Code Financial Regulations
03. (a) Present Station of Service :-(In Sinhala).....
- (In English).....
- (b) District of the Present Station of Service :-
- (c) The Working Station of Administrate by :- Line Ministry Provincial Council
- (d) If Provincial Council mention Province:-.....
- (e) Whether two envelopes of 9 X 4 inches in size with the address written accurately and clearly on the envelopes and stamps affixed to the value Rs. 45.00 are attached to the application for sending the Admission card :-
- (f) i. Postal Address (In Sinhala) :.....
- ii. Postal Address (In block letters) :-.....
04. Medium you sit for the examination (Sinhala / English / Tamil)
05. (a) Have you sat this examination before?

(b) Have you affixed stamp for this time, if sat the examination before?

Stamp Cage

06. Certificate of the candidate :-

- (i) I hereby certify that the particulars mentioned by me in this application are true and correct to my knowledge and that I need not affix stamps since I sit the Examination for the first time / have affixed stamps to the value of Rs. since I repeat the Examination,* and the stamps affixed by me to the application are genuine and not used before cancellation.
- (ii) I agree to abide by the rules and regulations stipulated by the Ministry of Health and Indigenous Medical Services concerning this Examination and I agree with whatever decision taken to cancel my candidature. If it was found that I am not eligible according to the rules of this examination.

.....
Date

.....
Signature of the candidate

07. Certification of by the Officer in charge of personal files

I certify that this application was submitted to me before the closing date and that the applicant has filled the application correctly according to the particulars in the personal file and a copy of this application is filed in the personal file.

.....
Date

.....
Name and Signature

08. **Certification of Head of Institution:**

I do hereby certify that Mr./Mrs./Miss*..... serves as a In this institution and he / she* sits the Examination for the first time / not for the first time* and has affixed stamps to the value of Rs. / not necessary to affix stamps* and the particulars furnished in the Application are true and correct to his/her* personal file and he/she* is eligible to sit for the Examination. He/she* placed his/her* signature before me.

Date :.....

.....
Signature of the Head of Institution
(Rubber Stamp)

09. **Certificate of the Head of Decentralized unit / specialized Campaign**

I certify that Mr./Mrs./Miss*..... serves as a in this institution, and the 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 Head of Decentralized Unit /
Specialized campaign (Frank / Rubber stamp)

Delete words which are inapplicable