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சுவசிரிபாய

SUWASIRIPAYA

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எனது இல) CF/EXV/06/2020
My No.)
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உமது இல)
Your No. :)

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திகதி) 16/09/2020
Date)

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சுகாதாரம் அமைச்சு
Ministry of Health

General Circular Letter No: 02-76/2020

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.

**Second Efficiency Bar Examination for the posts of Control Room Operator,
Automobile Technician, Electrician and Cinema Machine Operator
for which salary scale PL-3-2006(A) is stipulated of
Primary Technical service category – 2020(2nd Term)**

It is hereby notified that the Efficiency Bar Examination which should be passed by officers in the posts of Control Room Operator, Automobile Technician, Electrician and Cinema Machine Operator of Primary Technical service category for which salary scale PL-3-2006 (A) is stipulated of Ministry of Health before expiry of 03 years after promoted to Grade II will be held on ~~11.10~~ 16/09/2020 in the media of Sinhala, Tamil and English. Place and time of the examination will be mentioned on the Admission Card.

02. Qualifications

Only the officers who have got an appointment in Grade II in a post (**Control Room Operator, Automobile Technician, Electrician and Cinema Machine Operator**) for which salary scale PL-3-2006 (A) is stipulated of Primary Technical service category of Ministry of Health and those who have not yet completed the examination are eligible to apply for this examination.

N.B. :

As mentioned in the General Circular Letter No. 02-90/2015 dated 12.08.2015 of the secretary of the Ministry of Health & Indigenous Medicine Services the officers who have exceeded 3 years in

the Grade II in the posts of Electrician and Cinema Machine Operator as at 27.07.2012 need not appear for this examination, since such officers are exempted from this efficiency bar examination.

Take necessary action to send applications of the officers only who have been promoted to Grade II as at 30/09/2020 which is the closing date of applications and have already received the appointment letters.

03. Applications

Applications prepared by the candidates in accordance with the specimen form of application appended to this circular should be sent by registered post to reach " Director (Examinations) Ministry of Health Suwasiripaya, No.385, Rev. Baddegama Wimalawansa Thero Mawatha, Colombo 10, on or before 30/09/2020 through the respective Heads of Institute. The Head of Division should certify that the particulars furnished in each application are correct. A self addressed 2 envelopes (official or private address) in the size of 9" x 4" inches, affixed stamps to the value of Rs. 45.00 should be sent along with the application. Applications received after the closing date, incomplete or inaccurate will be rejected without notice.

N.B. :

Applications should be prepared using a paper of size A4 in such a way that the Nos 01 to 03 appear on the 1st side of the paper whilst the Nos 04 to 08 appear on the 2nd side of the paper. Applications that do not comply with the above format will be rejected without 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 stamps cage provided for in the application and cancel 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 under any circumstances.

05. Admission to the Examination :-

- I Candidates whose applications have been accepted will be issued with Admission Cards. They should duly complete and submit 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 issues by Ministry of Health or a Relevant Institution
 - (c) Valid Driving License
 - (d) Valid Passport

06. Scheme of the Examination :-

This examination consists of an essay type question paper from the subjects of Establishments Code and the Financial Regulations. The question paper consists of 07 questions. 04 questions are from the Establishments Code and 03 questions are from the Financial Regulations. 04 questions should be answered as 02 questions from each part. Total marks 100. Minimum 40 marks should be obtained to pass the examination. Duration is 1 ½ hours.

07. Syllabus of the Examination

07.01 Establishment Code

Chapter XXI	-	Protective Clothing and Uniforms
Chapter XXII	-	Welfare Amenities
Chapter XXIII	-	Special Concessions and Conditions Regarding Officers Suffering from Certain types of illnesses
Chapter XXIV	-	Salary Loans / Advances
Chapter XXV	-	Concessions to Members of Trade Unions.

Financial Regulations from FR 124 – FR 134

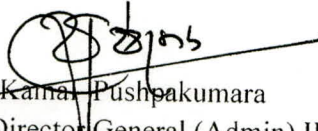
08. To follow the Regulations Related to Examination Procedure

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 relevant officers of Primary Technical service category in your Institution who are in the posts mentioned in the paragraph 02 , for which the salary scale PL-3-2006 (A) is stipulated. This information is also available on the web site – www.health.gov.lk

N.B. :

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


H.A. Kamal Pushpakumara

H. A. Kamal Pushpakumara Deputy Director General (Admin) II
Deputy Director General (Administration) For Secretary
Ministry of Health and Indigenous Medical Services
"Suwasiripaya" Ministry of Health
305, Rev. Baddegama Wimalawansa Thero Mawatha
Colombo 10

04. (a) Whether you sit for the examination for the first time: -.....
- (b) If not so, have you affixed stamps to the application?

Stamp Cage

05. Certification of the candidate :-

- (I) I do hereby certify that the particulars furnished by me in this application are true and accurate 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. since I repeat the Examination*, and the stamps affixed by me to the application genuine and not used before.
- (II) I agree to abide by the rules and regulations imposed on this examination by Ministry of Health & Indigenous Medical Services and I agree with whatever decision taken to cancel my candidature, if it is found that I am not eligible according to the rules of this examination.

.....
Date

.....
Signature of the candidate

06. Certification of the officer who have handle the personal file.

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

07. 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)

08. Certificate of the Head of Decentralized unit / specialized Campaign

I certify that Mr./Mrs./Miss*..... serves as a in my Institution 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 Head of Decentralized Unit /
Specialized campaign (Frank / Rubber stamp)