

දුරකථන ) 0112669192 ,0112675011  
தொலைபேசி ) 0112698507 , 0112694033  
Telephone ) 0112675449 ,0112675280

ෆැක්ස් ) 0112693866  
பெக்ஸ் ) 0112693869  
Fax ) 0112692913

විද්‍යුත් තැපෑල ) postmaster@health.gov.lk  
மின்னஞ்சல் முகவரி )  
e-mail )

වෙබ් අඩවිය ) www.health.gov.lk  
இணையத்தளம் )



සුවසිරිපාය  
சுவசிரிபாய

**SUWASIRIPAYA**  
සෞඛ්‍ය අමාත්‍යාංශය  
சுகாதார அமைச்சு  
**Ministry of Health**

මගේ අංකය )  
எனது இல )  
My No. ) CF/EXI/05/2021  
ඔබේ අංකය )  
உமது இல )  
Your No. : )  
දිනය )  
திகதி ) 16/06/2021  
Date )

## General Circular Letter No: 02-39/2021

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.

### Efficiency bar Examination for Public Health Midwives belonging to the paramedical service who are in Seg. II "B" / Grade III and on the salary scale (MT – 05) in the Ministry of Health – 2021

It is hereby notified that the Efficiency Bar Examination which should be passed by Public Health Midwives in seg II "B" / Grade III with in three years from the Date of appointment to Grade III, will be held on 26/09/2021 respectively in the medium of Sinhala, Tamil and English. The venue and the time of examination will be notified in the admission card.

#### 02. Qualifications

Officers who have been appointed to a post of family health officer in class Segment II "B" / Grade III, and not yet completed this examination 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 15/08/2021 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 that do not comply with the above specimen 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 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 or a relevant institution
  - (c) Valid Driving License
  - (d) Valid Passport

**06. Scheme of the Examination:-**

This examination consists of two papers with essay type question viz **Office Procedures** and **Financial Regulations**. Duration is 03 hours for each paper. Candidates should obtain at least 40% marks for a paper to pass the examination. Candidates should answer 05 questions out of 08. Total Marks of 100 will given be for each paper.

**07. Efficiency Bar Examination**

**07.1 Establishment Code & Procedure Rules**

This question paper is based on the following chapters of the Establishments code and the Procedure Rules of the Public Service Commission.

- ❖ **The following chapter of the Establishments Code are prepared on the Procedural Rules of the Public Service Commission.**

Chapter IV - Monthly Payments, Temporary status, Permanent status and pension ability

- ❖ **The following chapter of the Establishments Code**

Chapter XII - Leave

Chapter XIII - Railway Warrants

Chapter XIV - Travel on Duty within the Island

Chapter XIX - Government Quarters

Chapter XXVIII - Administrative Procedures

Chapter XLVII - General Conduct and discipline

Chapter XLVIII - Disciplinary Procedure

- ❖ **Public Service Commission rules.**

## 07.2 Financial Regulations.

Questions will be based on following chapters.

- (1) Chapter I - Expenditure and Revenue Estimates, Consolidated Fund, Annual Estimates, Alteration of Annual Estimates ( F.R 1 to F.R 68 )
- (2) Chapter III - Financial Management and accountability, Chief Accounting Officer, Accounting Official Revenue Account, Authority for payment. Approval certification assignment (F.R 124 to F.R 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](http://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 Sinhala Tamil and English mediums.**



Chamika H. Gamage

Deputy Director General (Admin) II

For Secretary

Ministry of Health

**Chamika H. Gamage**  
Deputy Director General (Administration) II  
Ministry of Health  
"Suwasiripaya"  
Colombo 10.



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 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 certify that \*Mrs. / Miss ..... is well known to me and she sits this Examination for / not for\* the first time and stamps to the value of Rs..... have been affixed to this application/stamp need not to be affixed\* and the particulars given by the applicant are correct according to the personal file of the applicant and she is eligible to this examination and placed her signature before me.

.....  
Date

.....  
Signature of Head of Institution/Frank/Rubber Stamp

09. **Certificate of the Head of Decentralized unit**

\*Mrs/Miss ..... serves as a Midwives Class Seg.II "B" / Grade III in my Division / Campaign\* and the particulars furnished by her in the application are correct according to the particulars in her personal file and she is eligible to sit for this Examination.

.....  
Date

.....  
Signature of the Head of Decentralized Unit  
(Frank / Rubber stamp)

\* - Delete irrelevant words