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சுவசிரிபாய

SUWASIRIPAYA

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சுகாதாரம் அமைச்சு
Ministry of Health

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எனது இல)
My No.) CF/EXV/13/2021
මගේ අංකය)
உமது இல)
Your No. :)
දිනය)
திகதி) 29/07/2021
Date)

General Circular Letter No: 02-62/2021

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 the officers in the Post of Electro-medical Technicians Grade III of Management Assistant Technical Segment 03 Service Category of Ministry of Health – 2021

It is hereby notified that the Efficiency Bar Examination which should be Passed before expiry of 03 years from the Date of Recruitment to the Post of Electro-medical Technicians in Grade III, will be held in the medium of Sinhala, Tamil and English. The date, venue and time of examination will be notified in the admission card.

02. Qualifications

The Officers who have been appointed to a post of Electro-medical Technicians in Grade III, on 22/08/2021 and those who have not yet Completed the Examination are only eligible to apply for this Examination Ministry of Health and have

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 22/08/2021 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 an paper A4 paper based on the specimen form of application so recommended No. 01 to 04 on the first page and from No. 05 to 09 appear on the 2nd page. 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 application and cancel the same by placing their signature and the date.
- II. The fees once paid will not be refunded or transferred to other Examinations under any circumstances.

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 question papers Viz **Office Administration & Establishments Code** and **Financial Regulations**. and **Financial Regulations**. Each question paper contains 10 structured essay type questions and all the 10 questions should be answered. The Paper carries 100 marks. For each paper minimum 40 marks should be secured to Pass the examination. Duration is two hours (02) for each paper.

07. Syllabus of the Examination

07.1 Office Administrations & Establishment Code Questions Paper

**07.1.2 Office Administrations - Knowledge on duties
- Knowledge on services provided by the institute and office Systems**

Establishment Code - Following Chapters in Part 1 of the Establishment Code

- | | |
|--------------|--|
| Chapter II | - Recruitment Procedure and Appointment |
| Chapter III | - Transfers |
| Chapter IV | - Monthly Payments, Temporary Status, Permanent Status and Pension ability |
| Chapter V | - Release, Reversion and Termination of Employment |
| Chapter VII | - Salaries |
| Chapter VIII | - Overtime , Holidays, Holiday pay and Allowances |
| Chapter XII | - leave |
| Chapter XIII | - Railway Warrants |
| Chapter XIV | - Travel on Duty Within the Island |
| Chapter XIX | - Government Quarters |
| Chapter XXIX | - Acquisitions of Land Investments and Mortgages |

07.2 Financial Regulations. questions paper

Financial Regulations. will be based on following chapters.

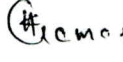
- (1) Chapter I - Expenditure and Revenue Estimates, Consolidated Fund, Annual Estimates, Alteration of Annual Estimates (F.R. 01- F.R. 68)
- (2) Chapter III - Financial Management and accountability, Chief Accounting Officer, Accounting Official Revenue Account, Authority for payment. Approval ,certification, assignment (F.R.124 - 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 relevant 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


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 do 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 /specialized Campaign.

* I Certify that Mrs /Missserves as a Public Health

Inspectors Class Seg. II "B" / Grade III in my Division / Campaign* and the particulars furnished by her in the applicatio 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