

Deputy Director General - National Hospital of Sri Lanka

Provincial Directors of Health Services

All Hospital Directorsunder the Line Ministry

Regional Directors of Health Services

Heads of Departments

<u>Second Efficiency Bar Examination for Health Education Officers of the Field /Office based –</u> <u>Segment 01 Service Category (MN 06 – 2006) A 2020 (2nd Term)</u>

It is hereby notified that the Second Efficiency Bar Examination for the Health Education Officers before expiry of Five years from the date of promotion will be held on **08/11/2020** in Sinhala, English, and Tamil media. The venue and the time of the examination will be mentioned in the Admission Card.

Qualifications

From the Officers who have been appointed to the Post of Research Officers (National Poisons Information Center in the National Hospital of Sri Lanka) and Health Education Officers in Grade I who have not yet completed the examination are eligible to apply for the examination.

N.B. Take necessary actions to send applications of the officers only who has been promoted to grade I by on or befor 02/10/2020 and already received thr appointment letters.

02. Applications

Applications prepared by the candidates as per specimen appended to this cirecular should be sent under registered cover to Director (Examinations), "Suwasiripaya", No.385, Ven. Baddegama Wimalawansa Thero Mawatha, Colombo 10, on or before 02/10/2020 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 an A4 paper based on the specimen form of the application so as to recommended from 01 to 04 on the first front page and from 05 to 08 on the second page. Applications which do not conform to above will be rejected any information.

03. Examination fees :-

- Candidates who sit for 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 refunded or transferred to other examinations under any circumstances

04. Admission to the Examination :-

- 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 issued by the Ministry of Health or a relevant institution
 - c) Valid Driving License
 - d) Valid Passport

05. Scheme of the Examination :-

This examination consists of written essay type question paper on **Case Studies**. The paper carries 100 marks. Five (05) out of 08 questions should be answered. Minimum 40% marks should be obtained to pass the examination Duration is 03 hours.

06. Syllabus of the Examination:-

06.1 Case Studies question paper

Name Of Question paper	Syllabus
Case Studies	Candidates are required to answer several questions based on one or more problematic cases created relevant to the field concerned which will test their logical thinking, creativity, skill in analyzing the problem, ability to take correct decisions and ability to apply theoretical knowledge practically.

385, ටූජන දිදේශම විමලවංශ හිමි මාවත, කොළහ 10. 385,வணக்கத்ද සூரிய பத்தேகம விமலவங்ச தேரோ மாவத்தை, கொழும 10. 385, Rev. Baddegama Wimalawansa Thero Mawatha, Colombo 10, Sri Lanka.

07. 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 should not be used. Any candidate who disregards this rule is liable to punishment.

- 08. Please bring the contents of this circular to the notice of all officer of your Division/ Specialized Campaign of Service category. The information is also available in the Web Site <u>www.health.gov.lk</u>
- Note; In case of any inconsistency between the texts in Sinhala, Tamil and English the text in Sinhala Language shall prevail.

85 Pushpakumara H.A Kama

Deputy Director General (Admin) II for Secretary Ministry of Health

H. A. Kamal Pushpakumara Deputy Director General (Administration) 02 Ministry of Health and Ioci genous Modeal Services "Survescripaye" 385, Rev. Beddegame Wanalasensa There Manatro, Colourbo 10. EXD

<u>Second Efficiency Bar Examination for Health Education Officers of the Field /Office based –</u> <u>Segment 01 Service Category (MN 06 – 2006) A 2020 (2nd Term)</u>

01.	1. (a) i. Full Name (In Sinhala)					
	ii.	Full Name (In block letters)				
	iii.	Names with initials (In Sinhala)				
	iv.	Names with initials (In block letters)				
	(b) i.	Date of appointment to Grade I : Letter No				
ii. Present annual salary :						
	iii.	Mobile Phone Number:-				
	iv.	National Identity Card Number:-				
02.	(a)	Present Working Station:- (In Sinhala) (In English)				
	(b)	The Working Station Administrate by: Line Ministry Provincial Council				
	(c)	If provincial council mention province :				
	(d)	District of the Present Working Station:				
	(e)	Whether a self-addressed (02) envelope in the size of 9 X 4 inches with stamps affixed to				
		the value of Rs. 45.00 has been attached to the application to post the Admission Card?				
	(f)	Postal Address (In block letters)				
03.	Medium	n you sit for the examination (Sinhala / English / Tamil)				
04	(a)	Have you sat this examination before?				
	(b)	Have you affixed stamp for this time, if sat the examination before?				
		Stamp Cage				

385, ஜூஜ வெர்குமை விலலவான் தேரோ மாவத்தை, கொழும்பு 10. 385, Rev. Baddegama Wimalawansa Thero Mawatha, Colombo 10, Sri Lanka.

05 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 Healt, 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

06. Certification of 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

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*..... 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