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தொலைபேசி			
Telephone	0112675449, 0112675280		
ෆැක්ස්) 0112693866		
பெக்ஸ்) 0112693869		
Fax)0112692913		
විදසුත් තැපෑල)postmaster@health.gov.lk		
மின்னஞ்சல் முகவரி)		
e-mail)		
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இணையக்களம்)		

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SUWASIRIPAYA

සෞඛ්ය අමාතයාංශය சுகாதாரம அமைச்சு Ministry of Health

General Circular Letter No: - 02-04/2012

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.

Relevant Heads of Institutions.

Efficiency Bar Examination for the officers in the Post of School Dental Therapists Grade I which belongs to the Pare- Medical Service (Salary Scale MT – 06) of Ministry of Health – 2021

It is hereby notified that the Efficiency bar Examination which should be passed by School Dental Therapists in Grade 1 before expiration of 05 years from the date of promotion to Grade I, will be held 0n 27.03.2022 respectively in the media of Sinhala, English & Tamil medium. The place and time of examination will be notified in the Admission Card.

02. Qualifications

Only the School Dental Therapists in Grade I and the Officers who are not exempted from the efficiency bar examination according to paragraph 03 below will apply for this examination.

03. In terms of the new scheme of recruitment

As Per the PA circular 6/2006 The New SOR related to the above post Approved by Public Service Commission which is effective from 27.09.2016, the officers who have completed a satisfactory period of service of five (05) years in for the effective date of 27.09.2016 Grade 1 are exempted from the requirement of passing the third Efficiency bar Examination.

N.B - Take necessary actions to send applications of the officers only who has been promoted to grade I by 25/02/2022 and already received thr appointment letters.

04. Applications

Applications prepared by the candidates as per specimen appended to this letter should be sent under Registered cover to reach the Director (Examinations) No.385, "Suwasiripaya" Ven. Baddegama Wimalawansa Thero Mawatha, Colombo 10, on or before 25/02/2022 through their Heads of Institutions. The Head of Division should certify the accuracy of contents in each application. A self-addressed 02 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 received after the closing date, incomplete or inaccurate will be rejected without notice.

N.B.: Applications be prepared in compliance with the specimen form of application in the size of A4 using in such a way that No: 01 to 04 appear on the first page whilst the No: 05 to 08 appear on the second page. Applications that do not comply with the specimen will be rejected without notice.

05. Examination fees :-

- I. Candidates who sit the examination for the first time are exempted from paying examination fees. Other candidates should affix stamps to the value of Rs. 25/= per subject in the application and cancel the same by placing his/her signature.
- II. The examination fees paid will not be transferred to any other examination or refunded under any circumstance.

06. Admission to the Examination :-

- I. Admission cards are issued to the candidates whose applications are accepted. The admission card should be duly completed and submitted to the supervisor of the examination centre. Otherwise, it will not be allowed to sit for 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) Identity card issued by the Department
 - valid Driving License
 - d) Valid Passport

07. Scheme of the Examination :-

This efficiency bar examination consists of an Subject related essay type question paper only. The question paper contains 08 question and out of that any 05 question should be answered. Duration is 03 hours and the total marks for the paper is 100. Minimum 40 marks should be obtained to Pass the examination. In case this Subject is failed, it could be completed later.

08. Syllabus of the Examination

Subject related essays (Syllabus)

- Stan dins instructions for field Dental Therapists. This Includes regulations in respect of leave, official correspondence, maintaining inventories. Which are given in Financial Regulations and to part 01 of the manual of Health Department and
- Other relevant regulations
- Practical dental Sciences and Descriptive knowledge of Tooth Extraction Procedure.
- Comprehensive knowledge on primary health care
- Comprehensive knowledge on Dental health education.
- Knowledge on public health
- Ability to identify basic malocclusions
- Knowledge on Dental health
- Knowledge on first aid

09. 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 equipments should not be used. Anycandidatewho disregards this rule is liable to punishment.

10. Please bring the contents of this circular to the notice of all relevant officers in your Division/ Specialized Campaign/ Institution.(This information can also be obtained from the web (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 (Administration) Peputy Director General (Admin)II Chamika H. Gamage

Ministry of Health "Suwasiripaya" Colombo 10.

For Secretary

Framey

Ministry of Health



For Office Use Only

Efficiency Bar Examination for the officers in the Post of School Dental Therapists Grade I which belongs to the Pare- Medical Service (Salary Scale MT – 06) Ministry of Health – 2021

01. (a) i. Full Name of the Applicant: (In Sinhala / Tamil)									
		ii.	ii. Full Name of the Applicant (In English block letters)						
		<u></u> i							
		iii.	Names withinitials (In Sinhala / Tamil).						
		iv.							
	Г								
	L								
((b)	i.	Date of Promotion to Grade I:						
	. ,	ii.	Present Annual Salary:						
		iii.	National Identity Card Number:-						
		iv.	Mobile No:-						
		v.	E – mail Address						
02.	6	(a)	Present Station of service (In Sinhala):-						
	(In English):-								
	(b)	District of the Present Station of service :-						
		c)	Working Station under the - Line Ministry						
		-/	- Provincial Council						
	(d)	the state of the s						
	9	(d) If provincial council mention province:							
			affixed to the value of Rs.45.00 has been attached to the application to post the						
	94	_	Admission Card?						
	(1	f)	1. Postal Address to post the Admission Card (In block letters):-						
n a									
03.	Γ	viedii	um you sit for the examination- Sinhala/ English/ Tamil						
04.	V	Vhetho	er you sit for the examination for the first time :-						
			Stamp Cage						
			Smill Ougo						

((i) I do hereby certify that the particulars furnished by me in this application are true and ac to my knowledge and I need not affix stamps since I sit the Examination for the first time affixed stamps to the value of Rs since I repeat the Examination,* and the s affixed by me to the application are genuine and not used before.						
((ii)	I agree to abide by the rules and regulations stipulated by conduct of this Examination and if I was found ineligible in Examination I agree with whatever decision taken for the ca	accordance with the scheme of the				
		Date	Signature of the condidate				
06. (Certi	fication of the officer who have handle the personal file	s				
I	It is here certified that the application was forwarded to before the closing date, the application has						
ŧ	been completed according to the details of the personnel file by the applicant. A copy of the application has been filed.						
•	-	Oate	Name and Signature				
07. (Certi	fication of Head of Institution					
I	cert	tify that Mr./Mrs/Miss serves	as a in this				
i	institution, and the particulars furnished by him/her in the application are correct in accordance						
t	he pa	articulars available in his/her personal file, and he/she sit the	e examination for the first time and				
ŀ	he/she is eligible to sit for the examination and he/she placed his/her signature in my presence.						
I	Date:.						
			ignature of the Head of Institution (Rubber Stamp)				
08. (08. Certificate of the Head of Decentralized unit / specialized Campaign						
*	Mrs.	/Miss	serves as a School Dental				
T	T hera Applic	apists Class Grade I in my Division / Campaign* and the cation are correct in accordance with the particulars available to sit for the Examination.	particulars furnished by her in the				
. %							
			1.00				
L	ate		ead of Decentralized Unit / alized campaign				
		, 20	alized campaign nk/Rubber stamp)				
		*- Delete words which are inapplicable	**				

05.

Certificate of the candidate :-