

General Circular Letter No: 02-112/2014

My No: TCS/B/05/2014

Ministry of Health

“Suwasiripaya”

385, Rev.Baddegama Wimalawansa Thero Mawatha,

Colombo-10.

18/08/2014

To: All Provincial Secretaries,
All Provincial/Deputy Provincial/Regional Directors of Health Services,
All Heads of Decentralized Units of Health Services,
All Directors of Teaching Hospitals, Provincial General Hospitals & Specialized Campaigns,
All Medical Superintendents & District Medical Officers

**AN INVITATION TO ALL MEDICAL CONSULTANTS IN THE MINISTRY OF HEALTH
TO DEPLOY A PEACEKEEPING CONTINGENT IN SOUTH SUDAN (2nd GROUP).**

1. As part of the International obligations for maintaining the world peace and security, Government of Sri Lanka has been called upon by the United Nations to deploy a peacekeeping contingent in South Sudan. The Contingent will comprise of a Level 1 and Level 2 hospital. This is a special requirement and the confidence United Nations has in Sri Lankan Armed Forces has afforded us with this opportunity.
2. United Nations peacekeeping are self sustaining and as per the United Nations rules, the contingent proved by the Sri Lanka must have a Level 1 and Level 2 hospitals which is equivalent to a base hospital in Sri Lanka. Level 1 hospital will be entirely manned by the Sri Lankan Army Medical Corps. The Level 2 hospital is required to have a Consultant General Surgeon, a Consultant Orthopaedic Surgeon, a Consultant Anaesthetist and a Consultant Physician. Sri Lanka Army is honoured to afford an opportunity to our Patriotic Medical Specialists to render their expertise to this noble undertaking by the Government of Sri Lanka
3. Hence in order to augment the Army Hospital which will be deployed in South Sudan, the following specialist grades are required by the Army.
 - a. Consultant General Surgeon
 - b. Consultant Orthopaedic Surgeon
 - c. Consultant Anaesthetist
 - d. Consultant Physician
4. An attractive package inclusive of vehicle and an army driver and fuel allocation will be provided to the consultant's household during the period of engagement. Duration of engagement will be 6 months and may be extended at the option of the consultant.

5. All patriotic consultants are earnestly requested to support the Sri Lanka Army in its international endeavor to maintain global peace.
6. Heads of Institutions are requested to bring the contents of this circular to the notice of all Specialist Medical Officers, in their institutions. Specialist Medical Officers are hereby requested to send in their applications in the format annexed herewith through their Heads of Institutions and Heads of Decentralized Units to reach this office **on or before 02/09//2014.** **Applications received at this office after the closing date will not be entertained.** Please send a direct copy to:

Director (Tertiary Care Services)
Ministry of Health
“Suwasiripaya”
385, Rev. Baddegama Wimalawansa Thero Mawatha
Colombo 10.

7. Selection will be done by the special board appointed by Secretary, Ministry of Health.
8. Ministry of Health will grant paid leave for Specialist Medical Officers those who are selected for the post and seniority will not be affected.
9. All Heads of Institutions and Specialist Medical Officers are kindly requested to contact Dr. P.L. Athapattu, Director (TCS) for any further clarifications (Office Tel. No. 011-2699145).

Dr. P.G. Mahipala
Director General
Ministry of Health

SPECIMEN APPLICATION FORM

1. Name of Applicant with initials :
(Please write your name as indicated in the personal file)
 - (a) Surname :
 - (b) Other Names :
2.
 - (a) Address :
 - (b) Telephone No. :
 - (c) Email Address :
3. Present post held :
 - (a) Date of appointment to present post:
 - (b) Place of work :
4. Date of appointment to
 - (a) Preliminary Grade :
 - (b) Grade II :
 - (c) Grade I :
 - (d) Specialist Grade :
5. No pay leave taken (Pl. indicate the time periods):
6. Qualifications
 - (a) Professional :
 - (b) Post Graduate :
 - (c) Date of Board certification :
7. Lists of specialist appointments held with dates:

	<u>Appointments</u>	<u>Stations</u>	<u>From</u>	<u>Period</u>	<u>To</u>
(i)					
(ii)					
(iii)					
(iv)					
(v)					
(vi)					

I certify that the above particulars are correct.

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Signature of Applicant

Date:

Observation & Recommendation of the Head of Institution/ Decentralized Unit/ Specialized Campaign.

I certify that the particulars furnished by the applicant are correct. (State any incorrect information, if furnished by the applicant).

Signature of Head of Institution

**Signature of Head of Decentralized Unit/
Specialized Campaign**

Date:

Date:

Observation and Recommendation of the Provincial Director of Health Services.

Date:

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Signature & Designation