

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 )  
website )



සුවසිරිපාය  
சுவசிரிபாய

SUWASIRIPAYA

සෞඛ්‍ය අමාත්‍යාංශය

சுகாதார அமைச்சு

Ministry of Health

මගේ අංකය )  
எனது இல ) CF/EXR/01/2024  
My No. )  
ඔබේ අංකය )  
உமது இல )  
Your No. : )

දිනය )  
திகதி ) 2024/04/30  
Date )

**General Circular Letter No: 02-69 /2024**

Provincial Health Secretaries,  
Deputy Director General – National Hospital of Sri Lanka – Colombo,  
Director - National Hospital of Sri Lanka – Kandy,  
All Hospital Directors under the Line Ministry,  
Provincial Directors of Health Services,  
Regional Directors of Health Services,  
Heads of Institutions

**Third Efficiency Bar Examination for the post of Health Driver in Grade I for which salary scale PL-3-2006(A) is stipulated of Primar Technical Service Category of Ministry of Health– 2024 (1<sup>st</sup> Term)**

It is hereby notified that the Efficiency Bar Examination which should be passed before expiry of 5 years after promotion to Grade I of the post of Health Driver, will be held on 30/06/2024 in the medium of Sinhala, Tamil, and English. The Venue, and time of the examination will be mentioned on the Admission Card.

**02. Qualifications**

The officers who have been promoted to Grade I of the post of Health Driver and those who have not yet completed the examination, are only eligible to apply for this examination.

**[N.B.] :** As mentioned in the General Circular Letter No. 02-90/2015 dated 12.08.2015 of the Secretary of the Ministry of Health, the officers who have exceeded 5 years in the Grade I of Health Drivers' Service as at 27.07.2012 need not apply for this examination, since such officers are exempted from this efficiency bar examination.

Take necessary action to send applications of the officers only who have been promoted to Grade I as at 22/05/2024 which is the closing date of applications and have already received the appointment letters. (It is mandatory to attach a certified copy of Grade I appointment letter along with application)

**03. Applications**

Applications prepared by the candidates in accordance with the specimen form of application appended to this circular letter should be sent by registered post to "Director (Examinations), Ministry of Health, Suwasiripaya, No.385, Rev. Baddegama Wimalawansa Thero Mawatha, Colombo 10, on or before 22/05/2024 through the respective Heads of Institutes. It is mandatory that the subject officer in charge of

personal files and the head of the institution certify that all the information provided in each application, correct that the applicant meets the required qualifications to appear for this efficiency bar examination. A self addressed envelope (official or private address) in the size of 9" x 4" inches, affixed stamps to the value of Rs. 110.00 should be sent along with the application. The name of the examination applied for should be mentioned on the top left corner of the envelope. Applications received after the closing date, incomplete or inaccurate will be rejected without notice.

**[N.B./ The application should be prepared using an A4 paper based on the specimen form of application so to accomodate from No.01 to 03 on the first page and from No 04 to 08 on the second page. Applications that do not comply with the above format will be rejected without notice.**

#### **04. Examination fees:-**

- I. 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 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 under any circumstances.

#### **05. Admission to the Examination:-**

- I. Candidates whose applications have been accepted will be issued with Admission Cards. They should duly complete and submit the 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 is conducted as a written test which consists of 50 multiple choice questions on **Subject Knowledge relevant to the post**. Total marks is 100. Candidates should obtain at least 40 marks to pass the examination. Duration is one hour.

#### **07. Syllabus of the Examination**

##### **Subject Knowledge relevant to the post Questions Paper**

Training in emergency ambulance techniques and transporting orthopedic patients given by Ministry of Health, knowledge about the contents in the driving manual issued by the Office of the Commissioner of Motor Traffic and knowledge of motor mechanics, knowledge relevant to the course in maintenance of ambulance conducted by the Ministry of Health.

#### **08. To follow the Regulations Related to Examination Procedure**

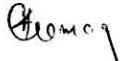
Candidates are warned against copying or attempting to copy from the script of another candidate or from any book or paper or notes whatsoever. No candidate should attempt to look at the script of another



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 equipments 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 in your 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 the examination will be effected if any contradictory is arisen in the examination notification published in Sinhala, Tamil and English medium.**

  
**Chamika H Gamage**  
Deputy Director General (Admin) II  
For Secretary

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

**EXR****Specimen form of application**

For Office Use Only

**Third Efficiency Bar Examination for the post of Health Driver in  
Grade I for which salary scale PL-3-2006(A) is stipulated of  
Primary Technical Service Category of Ministry of Health- 2024 (1<sup>st</sup> Term)**

01. (a) i. Full Name of the Applicant ( In Sinhala/ Tamil ) : .....

ii. Full Name of the Applicant (In English block letters)


iii. Name with initials (In Sinhala/ Tamil) : .....

iv. Name with initials (In English block letters)


(b) i. Date of promoted/ Absorbed to Grade I :- .....

Letter Number :- .....

(Attach a certified copy of Grade I appointment letter along with the application)

ii. Period of service in Grade I as at 27/07/2012 :- .....

iii. Present Annual Salary :- .....

iv. Mobile Phone Number :-

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

v. National Identity Card Number :-

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

vi. E-mail Address :- .....

02. (a) Present Station of service (In Sinhala) :- .....

(In English) :- .....

(b) District of the Present Station of service :- .....

(c) The working Station administrate by - Line Ministry ☐

- Provincial Council ☐

(d) If provincial council, mention province :- .....

(e) Whether a self-addressed 2 envelopes 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) 1. Postal Address (In Sinhala) :- .....

2. Postal Address (In English Capitals).....

03. Medium in which you sit for the examination (Sinhala/Tamil/English) :-.....

04. (a) Have you sit this examination before ? .....  
(b)

Stamp Cage

so, have you affixed stamps for this time ?

**05. Certification of the candidate :-**

- (I) I do hereby certify that the particulars furnished by me in this application are true and accurate to my knowledge and I need not affix stamps since I sit the Examination for the first time / have affixed stamps to the value of Rs. 25/- since I repeat the Examination\*, and the stamps affixed by me to the application genuine and not used before.
- (II) I agree to abide by the rules and regulations imposed on this examination by Ministry of Health and I agree with whatever decision taken to cancel my candidature, if it is found that I am not eligible according to the rules of this examination.

.....  
Date

.....  
Signature of the candidate

**06. Certification of the officer who have handle the personal file.**

I certify that Mr./Mrs./Miss\* ..... has correctly handed over me the duly filled application before the closing date and particulars furnished in this application are true and accurate as per the personal file and kept a copy of this application attached to 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\* ..... serves as a ..... in my Institution and 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 /