දුරකථන) 0112669192 , 0112675011
தொலைபேசி) 0112694033 , 0112675280
Telephone) 0112675449

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

මගේ අංකය)
எனது இல) MA/MS/A/05/2023
My No.)

ඔබේ අංකය)
உமது இல)
Your No.)

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திகதி) 2025-11- 7
Date)

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சுகாதார மற்றும் வெகுஜன ஊடக அமைச்சு
Ministry of Health & Mass Media

Deputy Director General (NHSL)/ Director (Kandy NH/ Galle NH)
Provincial / Regional Directors of Health Services
Directors of Teaching/Provincial/District General/Specialized Hospitals
Medical Superintendents of Base Hospitals,
Heads of Specialized Campaigns & Decentralized Units,
All Heads of Institutions concerned,

Post of Two (02) Medical Officers for National Medicines Regulatory Authority (NMRA)

This has further to the letter of even numbered dated 20th September 2025, regarding the above subject. Applications are called from Grade Medical Officers with a service period of three (03) years or more for the post of Medical Officer, National Medicines Regulatory Authority (NMRA).

Post	No. of Posts
Medical Officer	02

Application should be made on the specimen form appearing in the advertisement on Ministry of Health website and should be addressed to the following to reach on or before 21st November 2025, through the respective Heads of the Institutions/ Head of Special Campaign/ Decentralized Unit.

Director (Medical Services)
Ministry of Health
Suwasiripaya - Colombo 10

Selection is based on Grade Seniority.

Selected Medical Officers will released for a period of two (02) years for the said post. Those who wish to withdraw their applications, could do so within 28th November 2025.

Under the no circumstances they will be released from the above post during the stipulated period other than for PGIM training.

Dr. Asela Gunawardena
Director General of Health Services

Dr. ASELA GUNAWARDENA
Director General Of Health Services
Department of Health Service
"Suwasiripaya"
385, Baddegama Wimalawansa Thero Mawatha
Colombo 10.

Copy – Chairman, NMRA - For your information please.

Specimen Application Form

Special Post of Medical Officer

National Medicines Regulatory Authority (NMRA)

01. Name of Applicant : .....

02. Address : .....

.....

03. NIC Number : .....

04. Date of Birth : .....

05. Date of Appointment : .....

06. Working Station & Post : .....

07. Contact Numbers : Mobile: .....

WhatsApp:.....

08. Email : .....

09. Service Details :

	Station	Post	Period
1			
2			
3			
4			
5			

10. Special Qualifications :

.....

.....

.....

.....

.....

(Please attach the certified copies of the Post Graduate/Professional/Special Qualifications)

11. Whether you are in transfer order: Yes / No (If Yes state details)

.....

I certify that the above particulars are given by me is true and correct.

Date: ....

Signature of Applicant

Recommendations of the Head of the Institute / Decentralized Unit

Recommended/Not recommended.

I certify that the given at 01 to 10 in the application are correct

Date: ..... /...../2025 .....

Signature of Head of the

Institute / Decentralized Unit