Open Competitive Examination for Recruitment to the Posts in Grade-III of the Supervisory Management Assistant Technical Service Category (MN-03-2006-A) of the Ministry of Health - 2025

| | n in which you sit for the examination | on: District of residence | e: | | |
|----------------|-----------------------------------------------------------------------|---------------------------|------|--|--|
| | a - s, Tamil - T, English - E) te the relevant letter in the cage) | | | | |
| (maica) 01. | te the relevant letter in the eage) | | | | |
| i. | Name with initials :- | | | | |
| 1. | | | | | |
| | (In Sinhala/ Tamil) | | | | |
| | | | | | |
| ii. | Name in Full :- | | | | |
| | | | | | |
| | (In Sinhala/ Tamil) | | | | |
| iii. | Name with initials (In English capi | ital letters):- | | | |
| | (Ex: Mr./ Mrs./Miss. SILVA A.B) | | | | |
| iv. | Full name (In English capital letter | (2) | | | |
| ıv. | Tun name (in English capital letter | | | | |
| | | | | | |
| 02. Res | idential Address | | | | |
| i) | Permanent Address (In English cap | oital letters):- | | | |
| | | | | | |
| ii) | Permanent Address (In Sinhala/ Ta | mil):- | | | |
| | | | | | |
| 03. Dat | e of Birth :- | | | | |
| | | | | | |
| | Year | Month | Date | | |
| 3.1 | Age as at the closing date of applic | eations :- | | | |
| | | | | | |
| | | | | | |
| | Years | Months | Days | | |
| 04.37 | | | | | |
| | • | | | | |
| 05. Tel | ephone No. :- (Personal) Mobile : | Fixed : | | | |
| 06. E-1 | nail Address : | | | | |
| 07. Ge | nder :- Female Ma | le | | | |
| 08. WI | nether a citizen of Sri Lanka : Yes | No | | | |
| 09. Civ | vil status : | | | | |
| 10. Ed | ucational qualifications :- | | | | |
| (a) | G.C.E. (O/L) Examination :- | | | | |
| | Year : | Index No. : | | | |
| | | | | | |

| Sr. | Subj | iect | | Grade | | |
|--------------------------|-------------------|----------|------|-------|---|--|
| 01 | | | | | 1 | |
| 02 | | | | | 1 | |
| 03 | | | | | | |
| 04 | | | | | 1 | |
| 05 | | | | | | |
| 06 | | | | | | |
| 07 | | | | | | |
| 08 | | | | | | |
| 09 | | | | | | |
| 10 | | | | | | |
| | (A/L) Examination | Index No |). : | | | |
| Year :- | · | | o. : | | | |
| Year :- Sr. | | |). : | Grade | | |
| Year :- <i>Sr.</i> 01 | · | |). : | | | |
| Year :- Sr: 01 02 | · | | 0. : | | | |
| Year :- Sr: 01 02 03 | · | | o. : | | | |
| Year :- Sr: 01 02 03 04 | · | | 0. : | | | |
| Year :- Sr: 01 02 03 | · | | 0. : | | | |
| Sr: 01 02 03 04 05 | · | ject | | | | |

(b)

(c)

| | (Attach the certified copies of the certificates relevant to the vocational and technical qualifications) |
|-----|-----------------------------------------------------------------------------------------------------------|
| (d) | Experience and any other special qualifications: |
| | |
| | |
| | |
| | |
| 11. | Have you ever been convicted to a criminal offence in a court of law? (If yes, give particulars) |
| | |
| | |
| 12. | Details of the receipt obtained by paying the examination fee. |
| | I. Office to which the examination fee was paid:- |
| | II. Amount paid :- |

Affix the receipt obtained by paying Rs. 1,000/- to a Bank of Ceylon branch so as not to be detached. (Keeping a photocopy of the application and receipt will be useful.)

| | any particul | lars contained herein are found to be false | me in this application are true and correct. I am also aware that if e or incorrect before selection the application will be cancelled and I from the service without any compensation. |
|-----|-------------------------------------------------|------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Date : | | Signature of the candidate |
| 14. | Attestation of | of the signature :- | |
| | | | |
| | | | Signature and Official Stamp of the Attestor. |
| | DesignationAddress : | e of the Attestor : | |
| 15. | | ving matters are applicable only to offic vice and have satisfied the basic qualifica | ers who are currently serving in the Public Service or Provincial ations stated in the <i>Gazette</i> Notification. |
| | 15.1 To b | e filled by the Head of Department/ Insti | tution |
| | i. | | |
| | ii. | Permanent place of work and address: | |
| | iii. | Telephone No. of permanent place of w | ork : |
| | iv. | NIC No. of the officer: | |
| | v. | Post holds at the time of applying for th | e examination : |
| | vi. | Date of appointment to the said post:. | |
| | vii. | | id post? (If "yes", mentioned the date of confirmation): |
| | viii. | Has the officer been subject to discipparticulars) | olinary punishments during the period of service? (If "yes", give |
| | | | |
| | ix. | | punishment by now? (If "yes", give particulars) |
| | х. | | uiries at present? (If "yes", give particulars) |

13. Certification of the Applicant;

| This candidate, Mr./Mrs./Miss | | | | |
|-------------------------------|-------------------------------------------|--|--|--|
| | Signature Head of Department/ Institution | | | |
| Name Designation | : : | | | |
| Date Department/ Institu | ion: | | | |
| (Confirm placing th | | | | |

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