

EXB

Specimen Form of Application

For Office use only

Second Efficiency Bar Examination for Management Assistants Non- Technical Segment 2 Service
Category for which the Salary Scale (MN -1-2006(A)) is stipulated of the Ministry of Health Nutrition &
Indigenous Medicine - 2018 (2nd Term)

- 01 (a) (i) Full Name of the Applicant (In Sinhala):
(ii) Full Name of Applicant :(In English block capitals)

Grid for name entry in English block capitals

- (iii) Name with initials (In Sinhala):
(iv) Name with initials (In English block capitals)

Grid for name entry with initials in English block capitals

- (b) (i) Post :
(ii) Letter Number and date of Promote / Absorb to Grade II
(iii) Present annual salary
(iv) Telephone Number
(v) National Identity Card No

02. Mark "√" within the cages against the subjects that you wish to appear this time.

Computer Test []

Subject Knowledge []

03 (a) Present Station -(In Sinhala or Tamil) :-
(In English) :-

(b) Working Station under the - Line ministry :- []

Provincial council :- []

(c) If provincial council mention province:-

(d) District of the Present Station: -

(e) Whether a self-addressed two 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) i. Postal Address (In Sinhala or Tamil):-

ii Postal Address (In Block Capitals)

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

- 05. (a) Whether you have sit for the examination previously:-.....
- (b) If so, have you affixed stamps to the application?.....

Stamps Cage

06. Certification of the Candidate:

- i. I do hereby certify that the particulars furnished in this application are true and correct 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..... since I sit the Examination not for the first time ,and the stamps affixed are unused And genuine.
- ii. I do here by agree to comply with the rules and regulations imposed on examination and I do agree to comply with my decision to cancel my candidature if I decided disqualified accordance in until the minute of the Examination.

Date:.....

.....

Signature of the Applicant

07. Certification of the subject Officer who keeps the personal files

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

08. Certification of Head of Institution:

I certify that Mr./Mrs./Miss..... serves as a in this institution, and the particulars furnished by him/her in the application are correct in accordance with the particulars available in his/her personal file, and he/she sit the examination for the first time and he/she is eligible to sit for the examination and he/she placed his/her signature in my presence.

Date:.....

.....

Signature of the Head of Institution

(Rubber Stamp)

09. Certification of the Head of Decentralized Unit /Specialized Campaign.

I certify that Mr./Mrs./Miss..... serves as a in my Unit/ Campaign 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 the Head of the
Decentralized Unit/Specialized Campaign

(Rubber Stamp)

(*Delete words which are inapplicable)