

DEPARTMENT OF AYURVEDA

Efficiency Bar Examination of Sri Lanka Ayurvedic Medical Services – 2025 (November)

IT'S hereby notified that an Efficiency Bar Examination for Ayurvedic Medical Services (For Ayurvedic Medical Officers) will be held in Colombo by the Department of Ayurveda.

1. Candidates will be bound by the rules and regulations imposed by the Commissioner General of Ayurveda.
2. The application for this examination should be in the form of the specimen appendix to this notification and should be prepared by the candidate him/herself. Application should be sent by those who are qualified according to the service minute of the Sri Lanka Ayurvedic Medical Service by the registered post through the respective heads of institution to reach the Registrar, Examination Division, Department of Ayurveda, Navinna, Maharagama. On or before **21.11.2025** Efficiency Bar Examination for Sri Lanka Ayurvedic Medical Service – 2025 (**November**) should be indicated at the top left-hand corner of the envelope containing the application. Applications received after the closing date will be rejected.
3. The candidates appearing for the examination for the first time not needed to pay examination fee. However, sum of Rs. 230/- should be paid for the whole examination and sum of Rs.57.50 for each subject should be paid by Officers for subsequent sittings. The payments should be debited to Ayurveda Commissioner General's account Number 7041294 at Bank of Ceylon Maharagama Branch and the receipt should be attached with the application form. The fee will not be refunded under any circumstances.

“Two self-addressed stamped envelopes of "9x4" inches (Rs.110) should be sent along with the application form.”

4. Identity of the candidates -

Candidates will be required to prove their identity at the examination hall to the satisfaction of the supervisor for each subject they offer. For this purpose, one of the following documents should be submitted to the supervisor.

- I. The National Identity Card issued by Commissioner General of Registration of persons
- II. A valid passport
- III. A valid driving license

5. The commissioner, Department of Ayurveda will issue the timetable and admission card to all candidates whose applications have been accepted. Candidates should get their signature on the admission card attested in advance and submit to the supervisor of the examination hall. Candidates without admission card will not be permitted to sit for the examination. If a candidate has not received his/her admission card at least seven days (07) before the day of examination, He /She should without delay informed *via* 011-2745962 or the registrar, Examination Division, Department of Ayurveda, Navinna, Maharagama about the not – receipt of admission cards along with the following information:

- I. Name of the examination:
- II. Full name of the candidate:
- III. Postal Address:
- IV. Name of the post office, Registration Number and Date of the Receipt

6. Scheme of Examination. (According to the service minute of the Sri Lanka Ayurvedic Medical service).

I. Financial Regulation- one paper based on the following-

- (a) Financial Regulation of the Democratic Socialist Republic of Sri Lanka part I (Except chapter x)

II. Institutional Regulations and Code of Conduct – One paper based on the following

- (a) Establishment Code and Public Service Commission Code of Procedure

III. Hospital Administration- One paper based on the following –

- (i.) General rules and regulations relevant to the hospitals.
- (ii.) Cleanliness in hospital.
- (iii.) Rules and regulations relevant to the patients.
- (iv.) Supply proper meals to the patients.
- (v.) Administrations of drugs manufactures.
- (vi.) Rules and Regulation regarding the admission of patients.
- (vii.) Knowledge of the duties from the Medical Superintendent to the junior staff in the hospitals.

viii. General administration of Department of Ayurveda.

ix. General administration Regulations relating to the maintenance of store accounts, documents, books of the Department of Ayurveda.

x. Manual of procedure of the Department of Ayurveda.

xi. Understanding of the administration of the hospital.

IV. Official languages test

Candidates should act according to the Ayurveda Service minutes dated 27.10.2020 for the Official languages test.

<i>Language</i>	<i>Language Proficiency to be acquired</i>
For Official Language	Officers who joined the service in a language medium that is not an official language must acquire the required official language proficiency during the probationary period. Obtaining a pass qualification in G.E.C. (O/L)

<i>Language</i>	<i>Language Proficiency to be acquired</i>
Non-official language	According to the Public Administration Circular 01/2014 and the related circulars, the relevant level of expertise should be obtained

V. Candidate must obtain at least 40 marks to pass in each subjects. In case of any inconsistency between Sinhala, Tamil and English languages Sinhala language will prevail.

DR. ANIL JASINGHE,
Secretary,
Ministry of Health and Mass Media.

“Suwasiripaya”

No. 385, Rev.Baddegama Wimalawansa Thero Mawatha,
Colombo – 10.

07th October, 2025.

Specimen Application

Efficiency Bar Examination of Sri Lanka Ayurvedic Medical Service – 2025 (November)

Index No.:
(For Office use only)

Medium of Examination
(Write the relevant letter in the cage)

Sinhala – S Tamil - T

01. Name with initials (Mr /Mrs/ Miss) :-
(In English Capital Letters)

02. Name with Initials :-
(In Sinhala/Tamil)

03. Name denoted by initials :-
(In English capital letters)

04. Name denoted by initials :-
(In Sinhala / Tamil letters)

I declare that the above particulars are true that I am eligible to appear for the examination in the language medium indicated above. I agree to abide the rules and regulation of this examination.

Date :.....

.....
Signature of the candidate

Note: The candidate should sign in the presence of the head of his/her Department/Institution or and officer authorized to sign on behalf of such head of the Department.

Attestation of the signature

I do hereby certify that..... Who forward this application is an officer attached to my office know to me personally, and that he/she placed his or her signature before me on

.....
Signature and rubber stamp of the Attester

Name of the attester :-
Designation :-
Address :-
Date :-