

රාජා පරිපාලන, ස්වලේශ කටයුතු, පළාත් සභා හා පළාත් පාලන අමාතාහාංශය பொது நிருவாக, உள்நாட்டலுவல்கள், மாகாண சபைகள் மற்றும் உள்ளூராட்சி அமைச்சு Ministry of Public Administration, Home Affairs, Provincial Councils and Local Government

Date

ඒකාබද්ධ සේවා අංශය இணைந்த சேவைகள் பிரிவு COMBINED SERVICES DIVISION නිදහස් චතුරශුය, කොළඔ 07, ශී ලංකාව. Independence Square, Colombo 07, Sri Lanka சுதந்திரச் சதுக்கம், கொழும்பு 07, இலங்கை. ෆැක්ස් ඊ-මේල් වෙබ් අඩවිය தொலைபேசி:(94) 011- 2694560 தொலைநகல்:(94) 011- 2692254 மின்னஞ்சல்:dgcs@pubad.gov.lk இணையத்தளம்: www.pubad.gov.lk Telephone Web Site මගේ අංකය ඔබේ අංකය CS/DOS/Policy/මපාදු 17.05.2022 உமது இல திகதி:

Secretaries of Ministries Heads of Departments District Secretaries Divisional Secretaries

<u>Submitting letters related to establishment matters of the officers of the Development Officers' Service</u>

It is observed that the affidavits and leave reports sent with letters relating to the establishment matters of the Development Officers were presented with various deficiencies. Therefore, you are kindly informed to send the affidavits and leave particulars in line with the formats mentioned in Annex 01 and 02.

- Annex 01 Affidavits relevant to the name changes of the Officer
- Annex 02 Leave Particulars
- 02. Further, it has also been observed that the letter confirming the degree results of the Development Officers submitted to verify the accuracy of having a degree from a recognized university, which is the eligibility for recruitment under the Development Officer Service Minute, does not contain all the required information. Accordingly you are kindly informed to get the letter of confirming the degree as per the format given in Annex 03.

Sgd/ S. Alokabandara
Director General of Combined Services

Affidavit

I, Mr/Mrs/Miss (name) is (....) years of age and my birthday is (d/m/y). I, residing at (address) a citizen of (Sri Lanka/Other) and (married/unmarried), holding the Natiional Identity Card No (....) am a Buddhist by religion, do hereby solemnly affirm and declare on oath that:

- 01. I am the deponent herein who declare and sign.
- 02. My name has been mentioned in the Birth Certificate No (registration no) as (Full name- as in the Birth certificate)
- 03. My name has been mentioned as (Full name- as in the Identity Card) in the National Identity Card (NIC No) issued on (Date of Issuance)
- 04. My name has been mentioned in the Appointment Letter to Grade III of Sri Lanka Development Officers' Service (CS/DOS/XXXXX) dated (Date on which the signature was placed) issued by the Director General of Combined Services) as (full name in the appointment letter)
- 05. My name has been mentioned in the letter of verifying the degree No (number) dated (date) sent by the University (University) as (full name in the letter of appointment)
- 06. My name has been mentioned in the degree transcript provided by the (University) as (Full name mentioned in the Transcript)
- 07. My name has been mentioned in (Other document) as (Full Name)
- 08. I further affirm and declare on oath that one and the same person is represented by the names mentioned as (Name 1), (Name 2), (Name 3), (Name 4)..... who is me (correct full name) and that (the name expected to be used) will be used in all future duties.

I do hereby affirm that the above named deponent personally appeared before me on the day of , at (District) a and signed the above Affidavit after due reading and explaining of the whole in (Sinhala/ English/ Tamil) and asserting that the particulars are correct.	Sign	Stamp nature of the	e Deponent
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	Of	ficial Frank	

Providin	g Leave Pa	articulars				
) Crada II	I of Dovolonment	Officers' Service	
•••••	••••••	(CS/DOS/) – Graue II	i of Development	Officers Service	
	-	s of Mr/Mrs/Miss			•	
below.		from		to	Are given	
ciow.						
		,	Leave			
Ye	Year	Casual Leave	Vacation	Half Pay (excluding maternity leave)	No Pay Leave (excluding maternity leave)	
	2013					
	2014					
	2015					
	2016					
	2017					
	2018					
	2019					
	2021					
Particula:	s of lapse l	eave if the officer has	s taken any from r	orevious vacation l	eave, he/she has saved	
	•		•			
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Note – When submitting a leave particular, please send on calendar year basis.

Matters to be inquired from the relevant Universities by the Heads of Institutions when verifying the degree certificates of Development Officers

• Name:
• Registration No:
• Index No:
• Year and Month on which the final Examination is held:
• Studentship:
• Pass:
• Degree Obtained:
• Effective Date of the Degree: