

කාර්යාල
අංකය
Office:

011-2186055

ලේකම්
සெயலாளர்
Secretary:

011-2186057

ෆැක්ස්
පெද්ස්
Fax:

011-2187249



කාන්තා හා ළමා සංවර්ධන, පෙර පාසැල් හා ප්‍රාථමික අධ්‍යාපන,
පාසැල් යටිතල පහසුකම් හා අධ්‍යාපන සේවා රාජ්‍ය අමාත්‍යාංශය
மகளிர் மற்றும் சிறுவர் அபிவிருத்தி, முன்பள்ளி மற்றும் ஆரம்பக் கல்வி,
அறநெறிப் பாடசாலைகள், கல்விச் சேவைகள் மற்றும் பாடசாலைகள்
உட்கட்டமைப்பு வசதிகள் இராஜாங்க அமைச்சு

State Ministry of Women and Child Development, Pre-Schools & Primary
Education, School Infrastructure & Education Services

විද්‍යාල/මිනිස් තපාල / Email: secretary@childwomenmin.gov.lk
වෙබ් අඩවිය/ இணையத்தளம் / Website: www.childwomenmin.gov.lk

මගේ අංකය.
எனது இல.
My No.

MWCA/2/5/3/12/க.உ.ச.உ.உ.

ඔබේ අංකය.
உமது இல.
Your No.

දිනය.
திகதி.
Date

04.2022

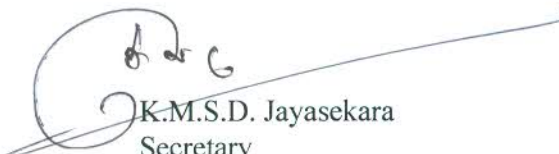
District Secretary/Divisional Secretary,

Calling Applications for the Annual Transfers of Women Development Field Assistants (Departmental) in the State Ministry of Women & Child Development, Pre-schools and Primary Education, School Infrastructure and Education Services – 2023

Applications are invited from Women Development Field Assistants in Divisional Secretariats and Counselling Centers functioning under the State Ministry of Women & Child Development, Pre-schools and Primary Education, School Infrastructure and Education Services for Annual Transfers in 2023.

All applications should be prepared according to the model application (Annexure 01) appended hereto and submitted with your recommendation.

01. Officers who apply for Annual Transfers should have completed the prescribed period of service in their present place of work. The service periods for the purpose are as follows.
 - a) Officers who have completed an active service period of 05 years or more in their place of work and who have completed a maximum of 08 years of continuous or discontinuous service within a single district.
 - b) Officers who have completed a service period of 05 years or more in a popular place of work.
 - c) Priority will be given to officers who have not received any transfer previously.
02. Information on all officers who have completed a minimum active service period of 5 years or more by 31.12.2022, irrespective of whether they have applied or not applied for Annual Transfers, should be provided as per Schedule 01, and information on all officers who have not completed 05 years of active service period should be provided as per Schedule 02. Those Schedules should reach me before 31.07.2022.
03. Please be kind enough to inform the officers holding the post of Women Development Field Assistant attached to your District/Divisional Secretariat by this Ministry to submit Applications for Annual Transfers on or before 31 July 2022 by registered post. Information in this regard has been published on the official website (www.childwomenmin.gov.lk) of the State Ministry.


K.M.S.D. Jayasekara
Secretary

Application for the Annual Transfers of the Women Development Field Assistants**01. Personal Information**

- 1.1 Name in Full :-
 1.2 National Identity Card Number :-
 1.3 Permanent Address :-
 1.4 DS Division of Present Residence :-

.02. Family Details

- 2.1 Marital Status :-
 2.2 Name of the Spouse :-
 Name of the workplace of spouse, if any :-
 Address :-
 2.3 Occupation :-
 2.4 Name of the workplace to which spouse has applied for transfer :-
 2.5 Distance between current workplaces of the applicant and spouse :-

03. Information of children

- 3.1 Number of children :-
 3.2 Number of schooling children :-

Name	Age	School	Grade

04. Information of current Workplace

- 4.1 Present workplace :-
 4.2 District :-
 4.3 Date of reporting for duty at the present workplace :-
 4.4 Period of service at the present workplace :-
 4.5 Distance between present residence and present workplace:-

05. Whether bears an office in a Trade Union

- 5.1 Name of the Trade Union :-

5.2 Present post :-

5.3 Date of Appointment to the post :-

06. Particulars of the prior service (Forward on an attachment)

Date of Appointment:-

(Details of the workplaces from the date of first appointment to current place of work)

Divisional Secretariat	District	Duration		Address of the Residences	Distance between the said address and place of work	Reasons for the transfer
		From	To			

07. Places willing to be transferred

Serial Number	Workplace	District in which the place of work is located	Distance from the residence
01.			
02.			
03.			

08. Name 03 places of work other than the places of work mentioned above

Serial number	Workplace	District in which the place of work is located	Distance from the residence
01.			
02.			
03.			

09. Name 03 places of work willing to serve outside the district of residence

Serial Number	Workplace	District	Distance from the present residence
01.			

02.			
03.			

I hereby certify that the above mentioned information is true and accurate.

Date :-

.....

Signature of the Applicant

I hereby certify that the above mentioned information is accurate in accordance with the personal file, and the application for transfer is recommended.

Date :-

.....

Signature and official stamp of
the

District/Divisional Secretary

Appeals on Annual Transfer – Form
01

Appeal to Public Service Commission Against Annual Transferdecision –
Information

Appellant

Personal Information

01. Name with Initials:-

02. Position /Class

03. Date of Birth:-
Gender

04. Age: (on 2022.12.31)

05. NIC number;- 06.

YYYY/MM/DD

07. Permanent Address:-

08. Temporary Address:-

09. Contact Numbers

Officer ;-

Personal ;-

10. Marital Status;-
Occupation and the Work Place of spouse

11. Name of the Spouse:-

12. Name of the

Appeals to Annual Transfers –

Form 01

Submission of Appeals to the Public Service Commission Against the decisions of Annual Transfers – Information of Appellant

A. Personal Information

01.Name with Initials			
02.Designation & Class			
03.Date of Birth :- YYYY/MM/DD	04.Age : (As at 2022.12.31)	05.NIC Number	06.Sex
07.Permanent Address	08.Temporary Address :-	09.Contact Numbers Office :- Personal :-	
10. Marital Status	11.Name of the Spouse :-	12. Occupation and the workplace of spouse :-	
13.Number of children	14.Agg of children :-	15.Names of the Schools :-	

B. Service Information

16.Date of Appointment to the Post :-					
17.Name of the Present Workplace :-		18.Town where the Workplace is located :-			
19.Date of reporting for duty at the present workplace :- YYYY/MM/DD		20.Service period at the present workplace (As at 31.12.2022) Years Months Dates			
21.Whether served in popular workplace/places ?					
22.Previous Workplaces in the public Sector		Workplace	Popular Workplace/Not a popular Workplace	Service Period	
	1			To	From
	2				
	3				
	4				
	5				

E. Recommendation of the Head of Ministry/Department

Information submitted by the above officer is accurate according to the particulars contained in his/her personal file.

<p>Appeal forwarded to the Public Service Commission Against to Annual Transfers 2023 is recommended / not recommended due to the following reasons.</p>	
<p>I.</p>	
<p>II.</p>	
<p>III.</p>	
.....
Date	Signature

<p>D. Recommendation of Transfer Authority :</p>	
<p>I. Number of officers in the Transfer Circle :.....</p>	
<p>II. Recommendation on Appeal:</p>	
<p>.....</p>	
<p>.....</p>	
.....
Date	Signature

C. Information on Transfer Requests (Please mark \checkmark in the relevant box)

23.	Whether applied for Annual Transfers	Yes		If yes, requested workplaces 1. 2. 3.
		No		

24. Number of officers in the Transfer Circle.....

25. Whether applied for Transfer Review Committee	Yes	
	No	

26. Information on requests made to Transfer Review Committee.

Cancellation of Transfer		If applied for an amendment of transfer, requested workplaces 01..... 02..... 03.....
Revision of Transfer		
Obtaining new Transfer		

27. Decisions of Transfer Review Committee

28. Reasons for submitting an appeal to Public Service Commission against the decision of the Transfer Review Committee.

- 1.....
- 2.....
- 3.....

29. Certified copies of relevant written documents to support above reasons are annexed as the following attachments.

Attachment (01).....

Attachment (02).....

Attachment (03).....

30. Requested Concession

1.

2.

3.

I declare that the above-mentioned particulars are true and accurate.

.....

Date

.....

Signature

E. Recommendation of the Head of Ministry/Department

Information submitted by the above officer is accurate according to the particulars contained in his/her personal file.

<div style="border: 1px solid black; padding: 10px; margin: 10px auto; width: 80%;"> <p>Appeal forwarded to the Public Service Commission Against to Annual Transfers 2023 is recommended / not recommended due to the following reasons.</p> <p>I.</p> <p>II.</p> <p>III.</p> <p>.....</p> <p style="text-align: center;">Date Signature</p> </div>
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<p>D. Recommendation of Transfer Authority :</p> <p>I. Number of officers in the Transfer Circle :</p> <p>II. Recommendation on Appeal:</p> <p>.....</p> <p>.....</p>
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Appeals to Annual Transfers –

Form 02

Submission of Appeals to the Public Service Commission Against to the decisions of Annual Transfers – Information of Successor

A. Personal Information

01.Name with Initials			
02.Designation & Class			
03.Date of birth :- YYYY/MM/DD	04.Age : (As at 2022.12.31)	05.NIC Number	06.Gender
07.Permanent Address	08.Temporary Address :-	09.Contact Numbers Office :- Personal :-	
10. Marital Status	11.Name of the Spouse :-	12. Occupation and the workplace of spouse :-	
13.Number of children	14.Agg of children :-	15.Names of the Schools :-	

B. Service Information

16.Date of Appointment to the Post :-					
17.Name of the Present Workplace :-		18.Town where the workplace is located :-			
19.Date of reporting for duty at the present workplace :- YYYY/MM/DD		20.Service period at the present workplace (As at 31.12.2022) Years Months Days			
21. Whether served in popular workplace/places ?					
22.Previous Workplaces in the public Sector		Workplace	Popular workplace/Not a popular workplace	Service Period	
				To	From
	1				
	2				
	3				
	4				

	5			
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C.Information on Transfer Requests (Please mark \checkmark in the relevant box)

23.	Whether applied for Annual Transfers	Yes		If requested to amend the transfer, the requested workplaces. 1. 2. 3.
		No		
Workplace to which transfer is granted				

24. Whether applied for Transfer Review Committee	Yes	
	No	

25.Request made to Review Committee

Cancellation of Transfer		Workplace for new transfer/revised transfer 01..... 02..... 03.....
Revision of Transfer		
Obtaining new transfer		

26. Decisions of Transfer Review Committee
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27. Whether Appeal has been submitted to Public Service Commission? Yes/No ;
.....

28.Recommendation of the Secretary to the State Ministry of Women and Child Development, Pre-Schools & Primary Education, School Infrastructure & Education Services on executing Transfer Circle to fulfil the request made by Appellant without causing prejudice to the Successor.

.....
.....
.....
.....

.....

Date

.....

Signature

