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## The Gazette of the Democratic Socialist Republic of Sri Lanka

අංක 2078/38 - 2018 ජූලි මස 04 වැනි බදාදා - 2018.07.04 No. 2078/38 – WEDNESDAY, JULY 04, 2018

(Published by Authority)

### PART 1: SECTION (1) - GENERAL

#### **Government Notifications**

#### MEDIATION BOARDS COMMISSION

#### Notice Calling for Nominations for the Appointment of Mediators

THE Mediation Boards Commission, by virtue of the powers vested in it by Section 5(1) of The Mediation Boards Act, No.72 of 1988, invites nominations for the appointment of Chairman and Mediators in respect of the following Panels of Mediation Boards who are to vacate post in terms of sections 6 to 11 in Schedule 1 of the Mediation Boards Act.

| Administrative District | Mediation Board Areas | Date of Vacation of Post |
|-------------------------|-----------------------|--------------------------|
| Colombo                 | 01. Kesbewa           | 2018.07.01               |
|                         | 02. Kolonnawa         | 2018.07.15               |
| Gampaha                 | 01. Biyagama          | 2018.08.01               |
| Galle                   | 01. Elpitiya          | 2018.07.01               |
|                         | 02. Balapitiya        | 2018.09.15               |
| Matara                  | 01. Kamburupitiya     | 2018.07.01               |
|                         | 02. Thihagoda         | 2018.07.01               |
| Jaffna                  | 01. Nallur            | 2018.09.15               |
|                         | 02. Point Pedro       | 2018.09.15               |
|                         | 03. Tellippalai       | 2018.09.15               |
|                         | 04. Delft             | 2018.09.15               |



| Administrative District | Mediation Board Areas   | Date of Vacation of Post                             |
|-------------------------|---|--|
| Ampara                  | 01. Karaitivu<br>02.Ninthavur   | 2018.09.15<br>2018.09.15                             |
| Kurunegala              | 01. Kuliyapitiya  | 2018.08.01   |
| Anuradhapura            | 01. Kebitigollewa<br>02. Padaviya<br>03. Central Nuwaragam Palatha<br>04. Nachchaduwa | 2018.07.15<br>2018.07.15<br>2018.07.15<br>2018.07.15 |
| Moneragala              | 01. Madulla   | 2018.08.15   |
| Kegalle                 | 01. Dehiovita<br>02. Yatiyantota  | 2018.07.15<br>2018.08.01                             |

- 02. The Mediation Boards Commission hereby gives notice Calling upon (a) the Individuals,(b) the Bodies, Organizations and Institutions of non political nature, and (c) the District Secretaries/ Divisional Secretaries specified hereinafter to submit names of person who are eligible for appointment as Mediators to the Panel of Mediators for the said Mediation Board areas:
  - (a) The following Individuals are entitled to submit nominations other than themselves for appointment to the Panel of a particular Mediation Board area:
    - (i) A Public Officer or a Provincial Public Officer serving as the Head of a Department or as the Regional Head of a Department in an office located within the Administrative District at which that particular Mediation Board area is situated:
    - (ii) A Head of a Place or religious worship or of school situated in that particular Mediation Board area;
    - (iii) A retired Head of a Department or School principal residing in that particular Mediation Board area;
    - (iv) Chairman of Panel of Mediators.
  - (b) The following Bodies, Organizations and Institutions of Non-political nature are entitled to submit nominations for appointment to the Panel of Mediators of any Mediation Board area:
    - (i) Any board, Organizations or Institution which has been in existence at least for a period of five years and which is engaged in carrying out or doing anyone or more of the under mentioned objectives;
      - (a) The enhancement of educational, religious, moral or spiritual, advancement of the community.
      - (b) The enhancement of social welfare and eradication of poverty.
      - (c) The enhancement of rural or community development.
      - (d) The enhancement of culture of sports.
      - (e) The enhancement of projects, programmes and activities intending providing and supplying basic needs of the peoples such as health, food and shelter etc.
  - (c) The following District Secretaries/Divisional Secretaries are entitled to submit nominations for appointment to the Panel of a particular Mediation Board Area:-

- (i) The District Secretaries of the Administrative District in which that Mediation Board area is situated;
- (ii) As the Following Persons are entitled to be appointed to the Panel of a particular Mediation Board Area whose names may be so submitted for appointment.
  - (a) any person being a resident in Mediation Board Area and engaged in any work in that Area;
  - (b) Any person resident or engaged in any work outside that Mediation Board Area, However the Commission is of the opinion that such particular person is eligible in exceptional circumstances; and
  - (c) Any Public Officer nominated under this paragraph by the District Secretary of the Administrative District within which that Mediation Board is situated is eligible for appointment to the Panel of Mediators of every Mediation Board area within that Administrative District;
  - (d) The present Chairman, Mediators of Panels of Mediators who are due to vacate post upon the completion of three years.
  - (e) Fulfilling of Minimum requirement as G.C.E. (O/L) is being compulsory for the new nominees other then the members those who holding membership of Mediation Boards already.
- 03. (a) Individual and Boards, Organizations and Institutions referred to in Paragraph (02) above may submit nominations of such Public Officers as are specified in Paragraph 2(a) and 2(b) above. An individual may not nominate his or her name for nominations.
- (b) District Secretary referred to in Paragraph 2(c) above may submit nominations of Public Officers, of whom not more than five may be appointed by the Commission to the relevant Panel of Mediators.
  - 04 Form of Nominations:
  - (a) Individuals should submit nominations substantially in Form (a) below;
  - (b) Boards, Organizations and Institutions should submit nominations substantially in Form (b) below; and.
  - (c) District Secretaries, Divisional Secretaries should submit nominations substantially in Form (c) below;

Each nomination should be in a separate form and should without fail contain the recommendation of the nominator as indicated in the next paragraph.

- 05. The recommendation of the nominator should not be a recommendation without reasons being assigned. It required to set out specific facts and circumstances to enable the Commission to draw its own reference to the suitability or otherwise of the person nominated for appointment to the Panel of Mediators, such as, for instance, his or her present or past occupation, the period of service or engagement in such occupations, any position or trust or responsibility held by him or her and the office, if any, held by him or her in any social service/religious/charitable Organization, Society or Body.
- 06. An individual or a Body, Organizations or Institution should as far as possible, refrain from making more than three nominations in respect of the same Mediation Board Area. However, this limitation will not apply to the present Chairman of the Panel of Mediators and to the District Secretaries, and Divisional Secretaries.
- 07. All nominations should be forwarded to reach the Secretary, Mediation Board Commissions, No: 80, Ministry of Justice's New Building, Courts Rd, Colombo 12. Before 03 months of Period from the Date That Vacate It's Stipulated duration By Each Mediation Boards.
- 08. The Mediation Boards Commission will, based on the basic qualifications to be checked at interview, select eligible candidates to be offered a preliminary training on Mediation skills and methods.

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09. Final decision in connection with any matter which is not being prevailed by the regulation stipulated in this notice is the decision made by Mediation Boards Commission at any time.

RAJANI ATHAPATTU, Secretary, Mediation Boards Commission.

Office of the Mediation Boards Commission, No. 80, Ministry Of Justice's New Building, Courts Rd, Colombo 12, 03rd July, 2018.

#### FORM "A"

(To be filled up by individuals eligible to recommend Nominations)

| 01. | . Mediation Board Area:                                  |       |  |  |  |
|-----|--|-------|--|--|--|
| 02. | Administrative District:                                 |       |  |  |  |
| 03. | Particulars of the Individual who recommend Nomination : |       |  |  |  |
|     | (a) Name in Full:  |       |  |  |  |
|     | (b)  | Res   | idential Address:  |  |  |
|     | (c) The status under which Nomination is sent:           |       |  |  |  |
|     |  | (i)   | Whether you are a Head of Department ? If so, please state the   |  |  |
|     |  |       | Name of the Department:  |  |  |
|     |  |       | Official address:  |  |  |
|     |  |       | The post you hold:   |  |  |
|     |  | (ii)  | Whether you are a Head of Place of religious Worship? Or a Regional Head of Department? If so, please state. |  |  |
|     |  |       | Its Name :   |  |  |
|     |  |       | Address:   |  |  |
|     |  |       | The post you hold:   |  |  |
|     |  | (iii) | Whether you a Retired Head of Department or a Retired Head of School ? If so, please state.  Its Name:       |  |  |
|     |  |       | The position held at the time of retirement:   |  |  |
|     |  |       | Mediation Board Area (Divisional Secretary) you reside:  |  |  |
| 04. | Pa   | rticu | lars of the Person nominated by you  |  |  |
|     | (a)  | His   | / Her Name in Full :   |  |  |
|     | (b)  | His   | Her Residential Address:   |  |  |
|     | (c)  | Dat   | e of Birth:  |  |  |
|     | (d)  | Nat   | ional Identity Card No.:   |  |  |
|     | (e)  | Tele  | ephone No.:  |  |  |
|     | (f)  | Wh    | ether he/ she a resident within the above Mediation Board area?  |  |  |
|     |  | Or    | outside the said Mediation Board area:   |  |  |
|     |  |       |  |  |  |

|      | (g) | g) Whether he/she is engaged in any work within the said Mediation Board Area?  Or outside the said area:          |                                  |
|------|-----|--|----------------------------------|
|      | (h) | Whether he/she is a Public Officer? If so, state the post he/she holds:  |                                  |
|      | ()  | (i) State your recommendation with reason therefore:   |                                  |
|      |     |  | Signature,<br>Seal if available) |
| Date | :   |  |                                  |
|      |     | FORM "B"   |                                  |
|      | T)  | (To be filled in by the Secretary of the Board, Organization or institution eligible to recommer                   | nd Nominations)                  |
| 01.  | Me  | Mediation Board Area:  |                                  |
| 02.  | Ad  | Administrative District:   |                                  |
| 03.  | Pai | Particulars of the Board, Organization or Institution that recommend Nominations:                                  |                                  |
|      | (a  | (a) Its Name :   |                                  |
|      | (t  | (b) Its Registered/Official address:   |                                  |
|      | (0  | (c) Date of its Registration or Establishment :  |                                  |
|      | (0  | (d) Period for which it has been in existence:   |                                  |
|      | (6  | (e) It's objectives of mission:  |                                  |
| 04.  | Par | Particulars of the person nominated by you:  |                                  |
|      | (a  | (a) His/ Her full Name:  |                                  |
|      | (t  | (b) His/Her Residential Address:   |                                  |
|      | (0  | (c) Date of Birth:   |                                  |
|      | (0  | (d) National Identity Card No.:  |                                  |
|      | (6  | (e) Telephone No.:   |                                  |
|      | (f  | (f) Whether he/she is resident within the above Mediation Board area?  |                                  |
|      |     | Or outside the said Mediation Board area:  |                                  |
|      | (§  | (g) Whether he/ she is engaged in any work within the said Mediation Board area? Or out                            | side the said                    |
|      | _   | Mediation Board area?  |                                  |
|      | (h  | (h) Whether he/she is a public Officer?  |                                  |
|      |     | If so, State the post he/she holds:  |                                  |
| 05.  |     | Has the Board, Organization or Institution passed a Resolution authorizing his/ her nominatio of such resolution : | ns? If so, State the date        |
| 06.  |     | State the recommendations of the Board, Organization or Institution with reasons herefore:                         |                                  |
|      |     |  | of Secretary,                    |
|      |     | <del>-</del>   | nizations or Institution)        |
| Date |     |  | ,                                |

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#### FORM "C"

(To be filled up by the District Secretary / Divisional Secretary eligible to recommend nominations)

| 01.   | Media                    | ation Board Area:  |                      |
|-------|--------------------------|--|----------------------|
| 02.   | Admi                     | inistrative District:  |                      |
| 03.   | Partic                   | culars of the District Secretary / Divisional Secretary who recommend nomination:                      |                      |
|       | (a)<br>(b)<br>(c)<br>(d) | Name in Full:  Official Address:  Your Administrative District:  Your Divisional Secretariat Division: |                      |
| 04.   | Partic                   | culars of the Officer in respect of whom nomination is forwarded.                                      |                      |
|       | (a)                      | His/ her full Name:  |                      |
|       | (b)                      | Whether he/ She is a Public Officer? If so, state the post he/she hold:                                |                      |
|       | (c)                      | Date of Birth:   |                      |
|       | (d)                      | National Identity Card No.:  |                      |
|       | (e)                      | Telephone No.:   |                      |
|       | (f)                      | His/ her official address:   |                      |
| 05.   | Your                     | recommendation with reasons therefore:   |                      |
|       |                          | <br>   | Signature.<br>(Seal) |
| Date: |                          |  | (~)                  |