

IN THE SUPREME COURT OF THE DEMOCRATIC SOCIALIST REPUBLIC
OF SRI LANKA

*In the matter of an application in terms of Article 126 read
with Article 17 of the Constitution of the Democratic
Socialist Republic of Sri Lanka.*

SC/FRA/171/2024

Lasantha Ganewatte
No. 11,
First Cross Road,
Walpala Matara.

PETITIONER

Vs.

1. Dr. Asela Gunawardena
Director General of Health Services
Ministry of Health
Suwasiripaya
No.385,
Ven. Baddegama Wimalawansa Thero
Mawatha,
Colombo 10.
2. Dr. P.G. Mahipala
Secretary
Ministry of Health
"Suwasiripaya"
Ven. Baddegama Wimalawansa Thero
Mawatha,
Colombo 10.
- 2A. Dr. Anil Jasinghe
Secretary
Ministry of Health
"Suwasiripaya"
Ven. Baddegama Wimalawansa Thero
Mawatha,
Colombo 10.
3. Sanath J. Ediriweera
Chairman
Public Service Commission
No. 1200/9, Rajamalwatta Road, Battaramulla.
4. N.H.M. Chithranada
5. G.S.A. de Silva
6. A.D.N. de Zoysa
7. S.M. Mohamed
8. Ranjani Nadarajapillai

9. C. Pallegama
10. M.B.R. Pushpakumara
11. Prof. N. Selvakumaran

4th to 11th Respondents are all members of the
Public Service Commission
No. 1200/9, Rajamalwatta Road, Battaramulla.

12. Secretary
Public Service Commission
No. 1200/9, Rajamalwatta Road, Battaramulla.
13. T.M.L.C. Senarathna
Chairman
Health Service Committee of the Public Service
Commission
No. 1200/9, Rajamalwatta Road, Battaramulla.
14. Dr. Ananda Hapugoda,
15. Nimal Saranathissa

14th and 15th Respondents are both members of the
Health Service Committee of the Public Service
Commission
No. 1200/9, Rajamalwatta Road, Battaramulla.

16. W.A.C. Wickramathilaka
Secretary
Health Service Committee of the Public Service
Commission
No. 1200/9, Rajamalwatta Road, Battaramulla.
17. Priyantha Atapattu
Director - Tertiary Care Services
Ministry of Health
"Suwasiripaya"
No. 385, Ven. Baddegama Wimalawansa Thero
Mawatha,
Colombo 10.
18. Lal Panapitiya
Deputy Director General of Health Services (MS-
1)
Ministry of Health
"Suwasiripaya"
No. 385, Ven. Baddegama Wimalawansa Thero
Mawatha,
Colombo 10.
19. Dr. Sunil de Alwis
20. Tharaka Hetiarachchi

19th and 20th Respondents are both members of the Review Board and c/o Director General of Health Services
Ministry of Health
"Suwasiripaya"
No. 385, Ven. Baddegama Wimalawansa Thero
Mawatha,
Colombo 10.

21. Don Lokugamage
c/o Director General of Health Services
Ministry of Health
"Suwasiripaya"
No. 385, Ven. Baddegama Wimalawansa Thero
Mawatha,
Colombo 10.

22. Hon. Attorney General
Attorney General's Department
Colombo 12.

RESPONDENTS

Lasantha Ganewatte v Dr Asela Gunawardena, Director General of Health Services and Others
Case No. SC/FRA/171/2024

Before: Janak De Silva, J.

Achala Wengappuli, J.

Dr Sobhitha Rajakaruna, J.

Counsel: Ali Sabry, PC with Naamik Naffah for the Petitioner.

Yuresha De Silva, DSG for the Respondents.

Written Submissions: Petitioner - 31 October 2025, 22 January 2026

Respondents - 26 January 2026, 03 February 2026

Argued on: 07 November 2025

Decided on: 10 June 2026

Judgement

Dr Sobhitha Rajakaruna J.

The Petitioner claims that she is a Consultant Physician and holds the position of Consultant Resident Physician at the New District General Hospital, Kamburugamuwa. The Petitioner has been holding the said position since 25 August 2021.

Summary of the Petitioner's Case

The Petitioner has invoked the jurisdiction of this Court under Article 12(1) of the Constitution, challenging, inter alia, the setting aside and/or reversal of her Annual Transfer - 2024 from the New District General Hospital, Kamburugamuwa, to the District General Hospital ('DGH'), Matara, for the post of Consultant Physician (VP/OPD), as reflected in the Annual Transfer for Specialist Doctors (Final List) approved by the 1st to 20th Respondents ('P15(b)'/ 'P16(b)'). She also challenges the appointment of the 21st Respondent to the said post, despite the 21st Respondent having scored fewer marks than her.

The Petitioner contends that the decision by the 1st to 20th Respondents to treat the New DGH Kamburugamuwa and the DGH Matara as one and the same institution, thereby rendering her transfer impermissible, is ex facie ultra vires, arbitrary, unfair, capricious, unreasonable, unjustifiable, irrational, inequitable, and violative of the principles of natural justice, proportionality, legitimate expectation, and equal protection of the law.

In support of her position, the Petitioner relies on the following principal grounds:

- i. The Ministry of Health duly identified and advertised the available vacancies for the Annual Transfers of Specialist Medical Officers - 2024, listing three vacancies under DGH Matara and one vacancy under the New DGH Kamburugamuwa separately under the category of General Medicine, Southern Province. The New DGH Kamburugamuwa was listed as an independent institution, not under DGH Matara.
- ii. This separate identification remained unchanged in the three subsequent amendments to the vacancy list.

- iii. In the Interim Lists published by the Ministry, the Petitioner was duly allocated the post of Consultant Physician (VP/OPD) at DGH Matara, consistent with her application and the published vacancies. There was therefore no necessity for her to file an appeal at that stage.
- iv. However, in the Final List (published on or about 29 May 2024 and later approved by the Health Services Committee), the Petitioner's transfer was suddenly set aside on the new ground that the New DGH Kamburugamuwa and DGH Matara are to be treated as a single institution. She was accordingly listed as an applicant with "insufficient preferences."

The Petitioner asserts that this decision is patently arbitrary and ad hoc, inasmuch as:

- a) the two institutions are listed as separate entities on the Ministry's website.
- b) the vacancy for the New DGH Kamburugamuwa was never listed under DGH Matara.
- c) the Petitioner's preference list was prepared on the clear basis that the two institutions were distinct, as per the published vacancy lists, thereby creating a substantive legitimate expectation.
- d) past practice in annual transfers (including the Medical Officer Grade transfers in 2023, as evidenced by 'P18') demonstrates that the two hospitals have consistently been treated as separate institutions, with medical officers being transferred between them.
- e) the Petitioner herself has observed numerous such transfers between the two hospitals while serving at the New DGH Kamburugamuwa.
- f) the 21st Respondent, who scored lower marks (56.2) than the Petitioner (58.98), was allocated the post at DGH Matara.

The Petitioner further submits that the impugned decisions were made without affording her any opportunity of being heard and without prior notice of the alleged policy change, thereby breaching the rules of natural justice and legitimate expectation. She maintains that even if a policy decision existed to treat the two institutions as one, it should have

been communicated at the stage of the advertisement for vacancy or in the interim lists, and not introduced unilaterally at the final stage.

The Petitioner states that the decisions: (a) to treat the New DGH Kamburugamuwa and DGH Matara as one institution; (b) to classify her as an applicant with insufficient preferences; and (c) to allocate the DGH Matara post to the 21st Respondent, are illegal, unlawful, irrational, irregular, and tainted by extraneous considerations. She prays for appropriate relief from this Court.

Alleged violation of Fundamental Rights

The Petitioner alleges that the above decisions undermine her legitimate expectations, violate the rules of natural justice, and are prompted by extraneous and/or irrelevant considerations and ulterior motives. Accordingly, she asserts that her fundamental rights to equality and equal protection of the law guaranteed under Articles 12(1) and 14(1)(g) of the Constitution have been infringed, or that there is an imminent and/or continuing infringement of the said rights.

The Petitioner further pleaded for an interim relief stating that grave and irreparable loss, damage, harm, and severe prejudice will be caused to her unless this Court grants the interim relief prayed for. This Court granted leave to proceed with the application under Article 12(1) of the Constitution. An interim order was issued staying the impugned decisions reflected in 'P15(a)' and 'P16(a)' until the final determination of this Application. However, the interim order was confined to the Petitioner's right to request a transfer from DGH Kamburugamuwa to DGH Matara, without affecting other transfers in 'P15(a)' or 'P16(a)' or the transfers scheduled for 2025.

Submissions of the Petitioner

The Petitioner submits that, according to documents marked 'P6' and 'P7' relating to the Annual Transfers of Specialist Medical Officers 2024, three vacancies under the category of Consultant General Physicians at DGH Matara, including the position held by Dr Mohotti, were identified. In addition, the Petitioner's own position at the New DGH Matara was also listed as a potentially vacant post. Although the Ministry of Health later issued amended vacancy lists marked 'P8(a)' and 'P8(b)', no amendments were made to classify the vacancy at New DGH Matara/Kamburugamuwa under DGH Matara or to

otherwise address the issue. The Petitioner also submits that, in the final transfer list issued on or around 29 May 2024 – ('P15(b)'), the Petitioner's transfer appeared under the category "Potential applicants with not enough preferences," accompanied by the remark that "*DGH Matara and Kamburugamuwa considered as a single institution.*" According to the Petitioner, this effectively amounted to a refusal of her transfer even before the Health Service Committee of the Public Service Commission ("PSC") had made its decision.

The Petitioner further contends that, in the final marks list for the Annual Transfers of Specialist Medical Officers 2024, she had obtained 58.9 marks, whereas the 21st Respondent, who was eventually appointed to the position sought by the Petitioner, had secured only 56.2 marks.

The Petitioner therefore argues that this sudden decision, made without affording her an opportunity to be heard, violated her legitimate expectation and infringed her fundamental rights guaranteed under Article 12(1) of the Constitution. Accordingly, the principal issues formulated by the Petitioner for determination by this Court are:

- a. Whether DGH Matara and New DGH Matara/Kamburugamuwa were considered as one Health Institution at the time the transfer sought by the Petitioner was refused?
- b. If so, whether the Petitioner is entitled to be forthwith transferred/appointed to DGH Matara in terms of the said Annual Transfer List?
- c. Whether the Petitioner's fundamental rights guaranteed under Article 12(1) are infringed by the 1st to 22nd Respondents or any one of them?

The Petitioner argues that all three interim transfer lists recognised the two hospitals separately and accommodated the Petitioner's requested preference without any qualification or adverse remark. It is therefore contended that, at the material time, the position that the two hospitals constituted a single institution was neither communicated to the Petitioner nor relied upon as a basis for rejecting her transfer application. Accordingly, the Petitioner maintains that DGH Matara and New DGH Matara/Kamburugamuwa were regarded as separate hospitals for the purposes of the Annual Transfers 2024.

The Petitioner contends that, in the Annual Transfers of General Medical Officers for the years 2012, 2019, 2021, 2022, and 2023, the two hospitals were consistently recognised as separate and distinct institutions, and transfers between the two institutions were permitted and effected. The Petitioner additionally submits that, although learned Counsel for the Respondents sought to distinguish the aforesaid transfers on the basis that they related to Grade Medical Officers rather than Specialist Medical Officers, such a distinction is irrational and unsupported by any formal policy or decision. The Petitioner argues that it is untenable to regard the two hospitals as separate institutions for Grade Medical Officers while simultaneously treating them as a single institution for Specialist Medical Officers. It is contended that no official decision or document has been produced to justify such differentiation, and that the purported distinction is merely an afterthought advanced to overcome the Ministry's established past practice, thereby defeating the Petitioner's legitimate expectation.

The Petitioner further submits that the 13th Respondent, in the Affidavit dated 17 September 2025, particularly at paragraph 09(x), has conceded that the two hospitals had been treated as separate institutions due to an oversight. However, the Petitioner argues that such a position is misleading when viewed in light of the consistent practice followed by the Ministry of Health in previous years.

The Position of the Health Service Committee

The 13th Respondent, who was the then Chairman of the Health Service Committee of the PSC at the relevant time, has affirmed in her affidavit that the DGH Matara and the New DGH Kamburugamuwa function under one administrative authority. She states that the annual transfers were finalised by the Health Service Committee pursuant to the powers delegated to it by the Public Service Commission under Article 56(1) of the Constitution in respect of officers belonging to the Sri Lanka Medical Service. She has denied the averments in the Petition insofar as they are inconsistent with the aforesaid position.

The 13th Respondent further states that, by letter dated 27 February 2024, the Health Service Committee approved the Notification relating to Annual Transfers – 2024, together with the composition of the Annual Transfer Committee and the Annual Transfer Review Committee. Thereafter, the relevant Notification calling for applications for

transfers was published. She avers that the Committees entrusted with the transfer process finalised the annual transfers after considering the applicable Service Minute, amendments thereto, including the amendment dated 22 March 2001, the relevant Rules, and the Appeals submitted by officers.

She has further affirmed that, upon clarifications received to the effect that the DGH Matara and the New DGH Kamburugamuwa were under one administrative authority, the annual transfers were finalised and the final transfer list approved by the Health Service Committee. Referring to documents marked 'R9' and 'R10', she explains that although a distinction had been maintained between the two institutions in the year 2023 due to an oversight, when finalising the Annual Transfers for 2024 in respect of Grade Medical Officers, both institutions were treated as one hospital.

The 13th Respondent also states that the Petitioner has not challenged the Notification calling for applications for transfers for the year 2024, the draft marks, or the final marks, but has only challenged the decision not to transfer the Petitioner from Kamburugamuwa to Matara on the basis that the two institutions are separate hospitals. She further states that the annual transfer process for the year 2025 has since been completed and that the Petitioner has been transferred to Kamburupitiya based on her preference ('R11A' and 'R11B').

Position of the Incumbent Secretary to the Ministry of Health (2A Respondent)

Dr Anil Jasinghe, the incumbent Secretary to the Ministry of Health, in his affidavit, has taken up the position that the DGH Matara and the New DGH Matara (Kamburugamuwa) function under one administrative authority and are not separate health institutions. The annual transfers for Specialist Medical Officers were finalised by the Health Services Committee as per the delegated authority.

The Notification calling for applications for the Annual Transfers 2024 was published after obtaining approval from the Health Services Committee. The Petitioner submitted her application in response to the said Notification. Certified copies of the Notification, the Amendment to the Service Minute dated 22 March 2001, and the Petitioner's application are marked as 'X1', 'X2', and 'X3', respectively. The transfer process was conducted by the duly appointed Annual Transfer Committee and Review Committee. Draft marks were published on 08 April 2024 ('X4') and finalised on 29 April 2024 ('X6'). The draft

Transfer List was published on 29 May 2024 ('X5') and the final Transfer List on 13 June 2024 ('X7'). The Petitioner did not challenge the marks allocated to her nor the process at the relevant stages.

Concerning the status of the institutions, the Secretary relies on General Circular No. 01-46/2017 dated 24 August 2017 (marked 'X8'), which sets out the criteria for identification of health institutions. Under this Circular, the DGH, Matara, has been assigned Health Institution Identification No. LMR0001073 under Health District Code MR. No separate identification number has been assigned to Kamburugamuwa.

The Secretary explains that certain units of the DGH Matara (including the Maternal & Neonatal Unit, Psychiatric, Rheumatology, Rehabilitation Units and the OPD) are physically located at Kamburugamuwa (approximately 8 km away), while other units remain at Matara. The administration, budgetary allocation, and supply of medical items for the Kamburugamuwa facility are handled under the DGH Matara. Hence, the facility at Kamburugamuwa is not a separate health institution but forms part of the DGH Matara. Similar arrangements exist in other hospitals, such as Panadura/Kethumathi and the shifted units of DGH Kalutara.

He further states that a new health institution is formally established only by a Ministry Circular and Gazette Notification, as was done for the National Renal Hospital at Polonnaruwa (marked 'X9'), a procedure that was not followed for Kamburugamuwa. In view of the above, the Petitioner's request for a transfer from Kamburugamuwa to Matara could not be granted as she was already serving within the same institution. She was transferred to Tangalle Hospital based on the marks obtained. Clarifications regarding the status of DGH Matara were submitted to the Health Services Committee.

The Secretary asserts that the Petitioner had ample opportunity to lodge appeals, that the interim lists were only provisional and did not create any legitimate expectation, and that her reliance on Circular 02-46/2024 is misplaced, as institution identification is governed by Circular 01-46/2017.

The entire Annual Transfer process for Specialist Medical Officers 2024 was carried out lawfully and in good faith, in accordance with the Service Minute, Public Service Commission Rules, and applicable Circulars, after due publication of all lists and consideration of appeals. The incumbent Secretary denies the allegations of arbitrariness,

mala fides, breach of legitimate expectation, and violation of natural justice. He specifically states that the Fundamental Rights of the Petitioner under Articles 12(1) and 14(1)(g) of the Constitution have not been infringed. Accordingly, the reliefs claimed have become futile and academic. The Secretary submits that he has acted in good faith and in full compliance with the applicable Rules, Service Minute, and Circulars, and therefore prays for dismissal of the Petitioner's application.

Summary of the Submissions made on behalf of the Respondents

The Respondents submitted that the Circular governing Annual Transfers of Specialist Medical Officers for 2024 categorised vacancies into four classes, namely: (a) Definite Vacancies, (b) Potentially Vacant Posts, (c) New Vacant Posts, and (d) End Posts. A "Definite Vacancy" arose where a Specialist Medical Officer had completed four years of service at a particular station. The Respondents contended that the Petitioner was transferred to the DGH Kamburugamuwa, upon her return to Sri Lanka in January 2021, and, accordingly, that station could not have been treated as a "Definitely Vacant" station until January 2025, since the Petitioner had not completed four years of service there. It was further submitted that, when the Petitioner instituted the instant Application on 24 June 2024, challenging the refusal to transfer her to the DGH, Matara, the station at which she was serving did not fall within the category of "Definite Vacancies".

The Respondents further submitted that "Potentially Vacant Posts" referred to stations where Specialist Medical Officers had completed two years of service, but where a vacancy would arise only if the present holder was selected for transfer elsewhere. It was stated that the Petitioner submitted her application pursuant to the notification marked 'P6'/'X1' with full knowledge of the applicable criteria.

The Respondent stated that the interim lists were merely provisional and intended for observations and appeals, and therefore no legitimate expectation could arise at that interim stage so as to suspend or alter the eventual outcome. The Respondents pointed out that the finalised marks were published on 29 April 2024 and the final transfer list on 13 June 2024 marked 'X6' and 'X7'/'P16(a)' and 'P16(b)' and however, the Petitioner had not challenged either the marks allocated to her or the annual transfer process itself. The Petitioner had challenged only the draft transfer list for 2024 marked 'P15(b)', in other words, only the refusal to transfer her from Kamburugamuwa to Matara.

The Respondents contended that the entire process, including appeals and review, was conducted under the Service Minute and the Rules of the Public Service Commission, and that the final list was issued after consideration by the Health Service Committee of the PSC. It was stated that, based on clarifications received from the Ministry, inter alia, that the DGH Matara and the New DGH Kamburugamuwa functioned under one administrative authority, the annual transfers were finalised after considering the appeal submitted by the Petitioner. In this regard, the Respondents relied on documents marked 'R7', 'R7A', 'R8', and 'R8A'. The Respondents maintained that the Petitioner had ample opportunity to pursue an appeal before the Health Service Committee of the PSC.

The Respondents further submitted that, according to the notice calling for applications ('P6'/'X1'), only one position at the DGH Matara was identified as a "Definitely Vacant" position, namely the post held by Dr B.K. Mohotti, who had completed four years of service from 01 January 2020. Dr Mohotti had requested a transfer from Matara to Kamburugamuwa, while the Petitioner sought a transfer from Kamburugamuwa to Matara. However, neither officer was granted the requested transfer. Instead, Dr Mohotti was transferred to the Mahamodara Hospital, and the vacancy thereby created at Matara was filled by Dr Don Lokugamage ('21st Respondent') from Kalawana. The remaining two posts at the DGH Matara were identified only as "Potentially Vacant" positions, since the officers concerned had completed less than two years of service.

Finally, the Respondents submitted that the present application had in any event become academic, as the Petitioner had subsequently completed her tenure at Kamburugamuwa and had thereafter been transferred pursuant to the Annual Transfer Process for 2025, as evidenced by documents marked 'R11A' and 'R11B'.

Conclusion

As illustrated above, the primary basis advanced by the Respondents for refusing the Petitioner's transfer is that the New DGH Kamburugamuwa and the DGH Matara are to be treated as a single health institution.

General Circular No. 01-46/2017 dated 24 August 2017, which sets out the criteria for the identification of health institutions (marked 'X8'), has not been challenged. Under this Circular, the DGH Matara has been assigned a Health Institution Identification No. LMR0001073. No separate identification number has been assigned to the facility at

Kamburugamuwa. A new health institution is formally established only by way of a Ministry Circular and Gazette Notification, a procedure that was followed, for instance, in the case of the National Renal Hospital at Polonnaruwa ('X9'), but not in respect of Kamburugamuwa.

Having carefully considered the material before this Court, including the affidavits filed on behalf of the Secretary to the Ministry of Health and the Chairman of the Health Services Committee of the PSC, I hold that the two hospitals function under one administrative authority and do not constitute separate health institutions for the purposes of annual transfers.

The Petitioner has not challenged the Notification calling for applications for transfers for the year 2024, nor has she challenged the draft marking scheme, the draft marks, or the final marks assigned in respect of the transfer process. Her grievance is confined solely to the decision not to transfer her from Kamburugamuwa to DGH Matara on the basis that the two institutions are separate hospitals. In those circumstances, this Court is unable to accept that the impugned decision, viewed in its proper administrative context, gives rise to a violation of the Petitioner's fundamental rights merely because the Respondents duly treated the two institutions as one hospital for the purpose of finalising the transfers.

It was also contended on behalf of the Petitioner that, in the Annual Transfers of General Medical Officers for the years 2012, 2019, 2021, 2022, and 2023, the two hospitals had consistently been recognised as separate and distinct institutions, and that transfers between the two institutions had accordingly been permitted and effected. However, the Respondents have taken up the position that those transfers related to Grade Medical Officers and not to Specialist Medical Officers, whose transfers are governed by a separate administrative framework and distinct operational considerations. Upon consideration of the material placed before the Court, I am unable to conclude that the instances relied upon by the Petitioner are sufficient either to establish that the Respondents acted arbitrarily or unreasonably, or to compel this Court to categorise the two hospitals as separate institutions for the purposes of transfers of Specialist Medical Officers.

The material before this Court further demonstrates that, although a distinction may inadvertently have been maintained between the two institutions in certain instances during the year 2023, the Respondents, when finalising the Annual Transfers for the year

2024 in respect of Specialist Medical Officers, had in fact treated the two facilities as one hospital. In my view, such circumstances indicate, at most, an administrative inconsistency or oversight in previous years. Such inconsistency, standing alone, is not sufficient to arrive at the conclusion that the Respondents have thereby violated the fundamental rights of the Petitioner guaranteed under the Constitution.

The Petitioner has not challenged the marking scheme applied to her. Her grievance is confined to the classification of the two hospitals. The fact that an oversight may have occurred in previous years does not justify this Court altering the established administrative demarcation, as doing so would create unfair disparity across the entire transfer process and prejudice the rights of other Specialist Medical Officers.

I must afford appropriate deliberation to the particular submissions made on behalf of the Respondents, namely that since the Petitioner had not completed four years of service at Kamburugamuwa, the station was properly classified only as a “Potentially Vacant” station. Consequently, any vacancy would arise only if the incumbent officer was selected for transfer elsewhere. On that basis, the Petitioner could not claim a legitimate expectation of obtaining a transfer with certainty.

Consequently, the Petitioner’s contention that she had a legitimate expectation of being transferred to DGH Matara and that such an opportunity could not subsequently be withdrawn cannot be sustained. The interim transfer lists were provisional in nature and did not create any enforceable legitimate expectation due to the attendant circumstances of this Case. The final decision was taken after due consideration of appeals and clarifications regarding the administrative status of the institutions.

It is important to draw attention to the submissions made on behalf of the Respondents referring to the case of *W.P.S. Wijerathna v Sri Lanka Ports Authority and Others* SC FR 256/17 SC Minutes 11th December 2020. His Lordship Justice Yasantha Kodagoda PC, in the said case has observed as follows:

“It is also necessary to point out that in *Wickremasinghe v Ceylon Petroleum Corporation and others*¹ Chief Justice Sarath Silva has pointed out that, although the objective of the right to equality is to ensure that all persons, similarly circumstanced are treated alike, it is seen

¹ [2001] 2 Sri LR 409

that the essence of this basic standard is to ensure ‘reasonableness’ being a positive connotation, as opposed to ‘arbitrariness’ being the related negative connotation. If legislation or the executive or administrative action in question is ‘reasonable’ and ‘not arbitrary’, it necessarily follows that all persons similarly circumstanced will be treated alike, being the end result of applying the guarantee of equality.”

For the foregoing reasons, I take the view that the Petitioner has failed to establish that the impugned decisions were arbitrary, unreasonable, or prompted by extraneous considerations or ulterior motives. After examining all the material placed before the Court, I hold that the impugned decisions of the Respondents do not constitute an infringement of the Petitioner’s fundamental rights under Article 12(1) of the Constitution. Accordingly, the instant Application is dismissed.

Judge of the Supreme Court

Janak De Silva J.

I agree.

Judge of the Supreme Court

Achala Wengappuli J.

I agree.

Judge of the Supreme Court