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## Local Authorities Election – 2025

### Legal Provisions regarding voters with disability, to be accompanied by a person to assist in marking the ballot paper at the polling station

Provisions exist in Section 54 (2) of the principal Act, Elections (Special Provisions) Act No. 28 of 2011 for a person who is totally or partially visually handicapped or physically disabled to be accompanied by a person to assist in marking the ballot paper.

02. The person who accompanies the disabled person should be over 18 years of age and should not be a contesting candidate at the election. He should not be an authorized agent or a polling agent of a political party at the election. In addition he should not be a person subject to any disability.

03. In order to be accompanied by a person to assist as stated above, a Certificate of Eligibility prescribed in the Tenth Schedule to the Act should be handed over to the officers at the polling station.

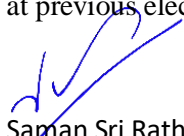
04. The form to be used to obtain the Certificate of Eligibility can be collected from the Grama Niladhari in the area of the relevant Local Authority. A specimen of the Certificate of Eligibility can also be downloaded by visiting the website ([www.elections.gov.lk](http://www.elections.gov.lk)) of the Election Commission. The visually or physically disabled person may obtain an application form from the Grama Niladhari. The form should be completed and the Grama Niladhari endorsement should be obtained on it and then submitted to the Government Medical Officer who will examine the applicant and certify that the applicant is entitled to be treated as a disabled person. (It is sufficient for a voter with a disabled who holds a temporary Disable Identity Card valid for 10 years issued by the Election Commission for Persons with disabilities to submit a photocopy of the said identity card along with certificate of eligibility).

05. The disabled person should proceed to the polling station with his national identity card or any other approved identity document acceptable at the polling station and the Certificate of Eligibility certified by the Government Medical Officer and accompanied by the person who is named to assist the voter. Having ascertained the identity of the voter the staff at the polling station will follow the normal procedure and issue a ballot paper to the voter. The voter will be directed to the Senior Presiding Officer along with the accompanying person. It is also essential that the person accompanying the disabled voter should bring his own National Identity Card or an Identity Document acceptable at the polling station.

06. The Senior Presiding Officer will collect the Certificate of Eligibility form the Voter and obtain the written statement from the accompanying person at the bottom of Part II of the certificates of Eligibility. Subsequently, the voter, the accompanying person and a member of the polling staff will proceed to the voting cubicle. There, in the presence of the Senior Presiding Officer and the member of staff, the ballot paper will be marked and inserted in to the ballot box.

07. A disabled voter is not allowed to go to the polling station with an accompanying person if the voter does not take with him a Certificate of Eligibility. The Certificate of Eligibility will be retained by the Senior Presiding Officer after the disabled person casts his vote.

08. It is also notified that if any disabled voter is unable to bring a person to assist him, is allowed to get the ballot paper marked on his behalf by the Senior Presiding Officer in the presence of another officer as practiced at previous elections.

  
Saman Sri Rathnayake,  
Commissioner General of Elections

(TENTH SCHEDULE)

CERTIFICATE OF ELIGIBILITY TO VOTE, ISSUED TO A PERSON SUBJECT TO DISABILITY, IN TERMS OF 54(2)(c) OF LOCAL AUTHORITIES ELECTIONS ORDINANCE (CHAPTER 262)

PART I

DECLARATION BY THE VOTER SUBJECT TO DISABILITY

- 1. Full Name : .....
- 2. Address : .....
- 3. Occupation: .....
- 4. Date of Birth : .....
- 5. No of the National Identity Card/ Valid Driving License/ Valid Passport: .....

I, ..... of ..... declare that I am a registered voter in the area of authority of ..... Council/Pradeshiya Sabha and that the particulars mentioned above are true and correct and apply for a Certificate of Eligibility, as provided for by law, to vote at the forthcoming Local Authority Election as a disabled person.

.....  
Signature/Left Thumb Impression of Voter

Date : .....

Name : .....

I certify that the above particulars and the below particulars mentioned are correct according to a records maintained by me.

DETAILS ACCORDING TO THE ELECTORAL REGISTER

- 1. Name of Voter: ..... 2. District: .....
- 3. Name of Local Authority: ..... 4. No. and Name of the Ward: .....
- 5. Letter of the Polling Division: ..... 6. Index No. of Voter: .....
- 7. Other information: .....

Date : .....

.....  
Signature of Grama Niladhari  
Official Seal

PART II

CERTIFICATE OF GOVERNMENT MEDICAL OFFICER

I certify that I personally examined the above mentioned applicant subject to disability who has applied to be entitled to vote at the forthcoming Local Authorities Election and certify that ..... is \* eligible / not eligible to vote as a person subject to a disability as provided for by law. (\* delete inapplicable words)

The nature of the voter's disability .....

.....  
Signature of Government Medical Officer

Date : .....

Name : .....  
Official Seal

(If there is a Temporary Identity Card issued by the Election Commission for disabled voters, it is sufficient to submit a photocopy of it in place of the medical officer's certificate)

FOR OFFICIAL USE

(Application No : .....) )

The Senior Presiding Officer should get this part completed

- Name of the person accompanying the voter: .....
- National Identity Card No: 

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- Residential Address : .....

I certify that I have come to cast the vote on behalf of the disabled person whose name is given in Part I and that I am over 18 years of age, not a candidate/authorized agent/polling agent/member of the staff of the polling station at this election and that I am not subject to any disability.

Name:.....

.....  
Signature of the Accompanying Person