**Annex II**

**MINISTRY OF PUBLIC SERVICE, ADMINISTRATIVE AND INSTITUTIONAL REFORMS**

**SURVEY FORM**

**SECTION A – PARTICULARS OF CANDIDATE**

(i) Ministry/Agency submitting nomination ………………………………………….…………………... (ii) Name of Candidate: Surname (Mr/Mrs/Miss) ……………………………………….……………… Other Names ………………………………………………………………….

(iii) Date of Birth: ………… Age: ……………. I.D No: .………………………………….. (iv) Designation: ………………………………………………………………………………….………… (v) Date joined service ………………………………Date of Confirmation……………………………… (vi) Qualification: ………………………………………………………………………………….………..

**SECTION B – COURSE DETAILS**

(i) Type of training: Course [ ] Seminar [ ] Workshop [ ] Study Tour [ ] *(Tick as appropriate)*

(ii) Title: ……………………………………………………… (iii) Dates: From ………………….. To: ………………….… (iv) Country: …………………………………….

(v) Financing Institution/Organisation ……………………………………………………….

**SECTION C –DETAILS ON FINANCIAL IMPLICATION**

(i) Costs to be met by donor Country/Agency: ………………………………………………...

(ii) Costs to be met by Government: ……………………… Estimated costs: ………………………

**SECTION D – OTHER TRAINING FOR WHICH THE CANDIDATE HAS BEEN NOMINATED**

*(i)* Type of training: Course [ ] Seminar [ ] Workshop [ ] Study Tour [ ] *(Tick as appropriate)*

(ii) Title: ……………………………………………………… (iii) Dates: From ………………….. To: ………………….… (iv) Country: …………………………………….

(v) Status of Nomination: Materialised [ ] Under consideration [ ] Rejected [ ] Withdrawn [ ]

*(Tick as appropriate)*

**SECTION E – DETAILS OF PREVIOUS TRAINING/WORKSHOP/SEMINAR/STUDY TOUR FOLLOWED ABROAD BY OFFICER OVER THE LAST THREE YEARS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of****Training** | **Title** | **Country** | **Date****From To** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

I certify that the information provided above is accurate.

…………………………………… Date: ……………………Tel No.: …………… Candidate’s Signature

**Certified correct by HR Section Endorsed by Reporting Officer** \*

Name: ………………………………………….. Name: …………………………………………..

Designation: …………………………………… Designation: …………………………………… Signature :……………….:……………………… Signature:……………….:……………………… Date ……………….. Tel No.: ………………. Date ……………….. Tel No.: ………………

(Affix Ministry’s seal)

\* The Reporting Officer should not be below the rank of Deputy Permanent Secretary

**Note1: Any inaccuracy will delay processing of the nomination**

**Note2: The Reporting Officer certifies the accuracy of information and the suitability of the nominee**

**Annex III**

**MINISTRY OF PUBLIC SERVICE, ADMINISTRATIVE AND INSTITUTIONAL REFORMS**

**Undertaking by the Applicant / Nominee**

I have taken cognizance of the terms and conditions of the Training Award. If accepted for a training award, I **undertake** to -

(i) carry out such instructions and abide by such conditions as may be stipulated by both the nominating and host Government and the sponsoring Government / agency / organisation in respect of the course of training;

(ii) follow the full course of training / study and abide by the rules and regulations of the university / institution / establishment in which I undertake to study or gain training;

(iii) refrain from engaging in political activities, or any form of employment for profit or gain;

(iv) submit any progress report which may be required / prescribed by the university / institution

/ establishment / sponsor / host Government;

(v) return to my home country promptly upon completion of the course of study / training; and

(vi) pledge to observe the laws and regulations, and respect the local customs of the host country where the study / training course will be held.

I also fully understand that if I am granted a fellowship / training award, it may be subsequently withdrawn if I fail to make adequate progress or for other sufficient cause determined by the host Government / sponsoring agency.

Signature of Applicant / Nominee : ……………………………….

Name: …………………………….

Date: ………………………………