

MINISTRY OF PUBLIC SERVICE AND ADMINISTRATIVE 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- (v) Status of Nomination: Materialised ☐ Under consideration ☐ Rejected ☐ Withdrawn ☐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

Name:

Designation:

Signature :.....

Date Tel No.:

Endorsed by Reporting Officer *

Name:

Designation:

Signature:.....

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

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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, hereby, confirm that:

- (a) I am medically fit and free from any medical problems which may impair my ability to attend and complete the course; and
- (b) all information provided is true, complete and accurate to the best of my belief and knowledge and I have not willfully suppressed any material facts.

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: