

MINISTRY OF CIVIL 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:
- (iv) Age:
- (v) I.D No:
- (vi) Designation:
- (vii) Date joined service Date of Confirmation.....
- (viii) Qualification:

SECTION B – COURSE DETAILS

- (i) Type of training: Course Seminar Workshop Symposium Conference
Study Tour Visit Other (to be specified) (Tick as appropriate)
- (ii) Title:
- (iii) Duration: Weeks
- (iv) Dates: From To:
- (v) Organisation/Training Institution
- (vi) Country:
- (vii) Financing Institution/Organisation

SECTION C – FELLOWSHIP DETAILS

- (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 Symposium Conference
Study Tour Visit Other (to be specified) (Tick as appropriate)
- (ii) Title:
- (iii) Duration: Weeks
- (iv) Dates: From To:
- (v) Organisation/Training Institution
- (vi) Country:
- (vii) Financing Institution/Organisation
- (viii) Status of Nomination: Materialised Under consideration Rejected Withdrawn
(Tick as appropriate)

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

Type of Training	Title	Country	Financing Institution	Duration (Weeks)	Date	
					From	To

I certify that the information provided above is accurate.

.....

Date: Tel No.:

Candidate's Signature

Certified correct by Reporting Officer *

Name:

Signature :.....

Designation:

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