

NOMINATION FORM

ANNEXURE I

1. Programme Title:
2. Name of the Institute:
3. Venue:
4. Programme Dates:
5. Name of the candidate (In Capitals letters):
6. SC/ST/OBC/OTHERS: Date of birth:
7. Designation:
8. Pay Scale: Basic Pay:
9. Academic Qualification:
10. Professional Qualification:
11. Address for the communication (With PIN):

12. FAX/Email:
13. Phone No. (Office): Phone No. (Personal)
14. Brief description of the duties of the officer:

(Signature of the Candidate):

15. Place: Date:

16. To BE FILLED IN BY THE sponsoring authority:

Certified that:-

- (a) The particular given above are correct.
- (b) Due care has been taken of the training needs of the officers nominated with reference to his present/future duties vis-à-vis the content of the course
- (c) The Offices, If selected, Will be relieved on full time basis for attending the programme.

Address of communication of sponsoring Organization:

Pin: Phone: fax/email:
Place:
Date:

Signature of the sponsoring authority with Seal