Training Nomination for Short-Term & Long-Term

1. Particular of candidate

a. Name:

b. Employee ID No. :

c. Position Title and Level:

d. Citizenship ID No. :

e. Date of Birth (dd/mm/yy):

f. Agency and Location:

g. Contact No. :

h. Permanent Address:

i. Quota Reference No. & date:

    i. Security Clearance Certificate:

    ii. Audit Clearance Certificate:

    iii. Medical Fitness Certificate:

j. Qualification:

k. Date of Initial Appointment:

l. Attached current Job Description:

2. Details of the Training

    a. Course Title:

    b. Institute/City/Country:

    c. Commencement date of the course:

    d. Source of funding:

3. Details of all past training:

Course Title	Institute/Country	Start Date	Duration	Source of funding

I, hereby certify that the above information is correct to the best of my knowledge. I understand that I am liable to be subjected to disciplinary actions by appropriate authorities in the event that they find the above information incomplete and/or incorrect.

Date: _____ (Name and Signature of the Candidate)

Official use only

4. Approval of the HR Committee (Attach copy)

5. Verification: The officials countersigning this form shall be accountable and liable for disciplinary action in case information provided is incomplete and/or incorrect.

Signature   Signature
Name of HR Officer   Name & Position Title
Date: Seal of the HoD

Signature
Name & Position Title
Seal of the Head of the Corporation
Date:

** For in country short-term training, candidate is not required to produce the documents.

** For ex-country short-term training, the original documents are to be retained with
   HQ, corporation.

** For long-term training, original documents and a copy of citizenship identity card are to be
   Submitted to the HQ of the corporation.