

Shram Shakti Bhawan, Rafi Marg
New Delhi, dated 26th December, 2018

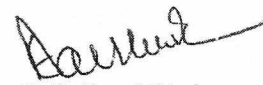
TRAINING CIRCULAR

The following training programme is being conducted by National Productivity Council in the coming month:-

Sl.No.	Name of the Workshop	Conducting Institute	Date of Training/ Workshop & Venue	Eligibility Criteria	Last date of Receipt of Nominations	Fees
1.	Advanced course on RTI handling Tools and Effective Office Managment	NPC, Gandhi Nagar	11 th -15 th February, 2018, Kanyakumari	SSA/ASO/SO/US	4.1.2019	Rs. 49,800/- per participant
2.	Team Building and Leadership Skills	NPC, Delhi	4 th -8 th March, 2018 Ooty	SO/US/DS and equivalent officers	15.1.2019	Rs.48000/- per participant

2. Interested and eligible officers may send their nominations in the proforma provided overleaf through proper channel so as to reach Administration Section latest by date as mentioned above.

3. All officers are advised to carefully check their availability and other commitments before applying for a particular training.



(A.K. Kaushik)

Under Secretary to the Govt. of India

Tel.No. 23738126

Email: usadmn-mowr@nic.in

Copy to:

1. All Wing Heads/All Divisional Heads in the Ministry of Water Resources, RD &GR.
2. Shri Vivek, Admn Section -- for uploading on the Circular page of the intranet under Head 'Training'.

Proforma for Training Nomination

To,

**Under Secretary (Admn)
MoWR, RD & GR
Shram Shakti Bhawan
New Delhi.**

Subject – **Nomination for Training Program.**

Sir,

I wish to apply for the Training Program the details for which are given below:-

Training Program Details

Training Circular Number (File No.)- _____

Date of Training Circular- _____

Training Topic - _____

Conducting Institute and Venue- _____

Duration of Training - _____

Last Training Program Attended by me - _____
(Mention Training Topic & Duration)

Recommendation of Reporting Authority

Name and Designation of Reporting officer - _____

Recommendation (Signature) of Reporting officer - _____

It is requested that I may be considered and nominated for the above Training Program.

Yours faithfully,

Name - _____

Designation/Posting - _____

Mobile Number - _____

E-Mail-id _____

(Mobile number and Email id required by Training institute for coordination with participants)