## FOREIGN TRAINING COMMITTEE PROFORMA

Note: - Incomplete or incorrectly filled forms will not be Considered.

Note: - Incomplete of incorre					FORMATION			
Photograph	Name	Gender	Date of Birth	Domicile	CNIC Number (Attach Photocopy)	Educational Qualifications		
			PROFE	SSIONAL I	NFORMATIO	N		
Ministry/Division/Department (Name and Address)	Present Designation / Grade (BPS)	Service Group	Date of Joining Govt. Service	Date of Present Posting	Regular or Contract Appointment	Probatio n	Inquiries Pending	Present Professional Responsibilities
			TRA	INING INF	ORMATION			
List of all Foreign Trainings received previously (Name of Trainings)	Dates of Trainings Received	Relevance of proposed training with job responsibilities				Whether Nominated by the Ministry or Provincial Govt. or Department		

Signature of the Candidate	