

IN-SERVICE TRAINING FORM

(Note: All sections in this form are compulsory)

I. Particulars of Candidate:

- a. Name :
- b. Employee ID No. :
- c. Position Title :
- d. Citizenship ID No. :
- e. Date of Birth (dd/mm/yyyy) :
- f. Agency & Work Location :
- g. Contact No :
- h. Permanent Address :
- i. Quote Reference No. & Date of :
 - i. Online Security Clearance Certificate :
 - ii. Audit Clearance Certificate :
 - iii. Medical Fitness Certificate :
- j. Qualification :
- k. Date of Initial Appointment :
- l. Present Job Description
 - 1
 - 2
 - 3

II. Details of Training

- a. Planned (quote slot number)/Ad hoc :
 - b. Course Title :
 - c. Institute/City/Country :
 - d. Commencement Date and Duration :
 - e. Source of Funding :
-

III. Details of all Past Trainings (if the space provided is not sufficient, use a separate sheet). Please start with the last training.

| Course Title | Institute/City/ Country | Start Date (dd/mm/yyyy) | Duration (months) | Source of Funding |
|---------------------|------------------------------------|------------------------------------|------------------------------|------------------------------|
| i) | | | | |
| ii) | | | | |
| iii) | | | | |
| iv) | | | | |

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:

(Signature of the Candidate)

Official use only

IV. Assurance (for long-term training only) that:

The Agency will ensure candidate's return to Bhutan immediately after completion of training. Failing to return shall be dealt as per BCSR 2010.

V. Approval of the HR Committee (attach copy.)

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

Signature

Name of HR Officer

Date:

Signature

Name & Position Title

Seal of the Head of Department/Division

Date:

Signature

Name & Position Title

Seal of the Head of Agency

Date:

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

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

For long-term training, original documents and a copy of Citizenship Identity Card are to be submitted to the RCSC.

LIST OF DOCUMENTS TO BE SUBMITTED BY A CANDIDATE

1. Medical Fitness Certificate issued by a competent RGoB medical doctor;
2. Valid online Security Clearance Certificate;
3. Valid Audit Clearance Certificate;
4. Course content and schedule from the Institute;
5. Attested copies of academic transcripts (for long-term training);
6. Letter of Acceptance from the Institute; and
7. Any other document that may be required.