

Scholarship for International Master of Public Administration

APPLICATION FORM

1. **PERSONAL DETAILS**

Title:

Surname:

Other name(s):

Designation:

Present posting:

National Identity No.:

Date of birth: Age:

2. **CONTACT DETAILS**

	Office	Residence
Address		
Telephone No.:		
Mobile No.:		
Fax No.:		
E-mail		

3. **QUALIFICATIONS**

Diploma / Degree / Post Graduate / Professional Qualifications (*Attach Photocopies*):

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4. EMPLOYMENT HISTORY

Present Employment

Post held:

Temporary / Substantive:

Date of present appointment:

Previous Employment

Post held	Temporary/ Substantive	Ministry/Department	Date of Appointment

5. COURSES ABROAD

Government sponsored Courses/Seminars/Workshops which you attended overseas

Title	Date	Country

I certify that the information provided by me in this form is true, complete and correct.

Signature of applicant: Date:

To be filled by Supervising Officer

I certify that the above information have been verified and are correct

Signature of Supervising Officer:

Name:

Designation:

Date: Tel No.: