

а. b.

c. d. e. f.

म् अर क्रिल स् विश्रू र्या वर्षिय लवा श्रूच ही

Khesar Gyalpo University of Medical Sciences of Bhutan Royal Government of Bhutan Thimphu: Bhutan



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 and Level	:
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	of :
	i. Security Clearance Certifi	icate :
	ii. Audit Clearance Certifica	
	iii. Medical Fitness Certificat	re :
j.	Qualification	:
k.	Date of Initial Appointment	:
1.	Present Job Description	
	1	
	2	
	3	
II.	Details of Training	
	aned (quote slot number)/Ad hoc	:
Cou	rse Title	:
	itute/City/Country	:
	nmencement Date and Duration	
	ning Category	:long
Sou	rce of funding	



দীশ্বস্কুঅর্থনার্থ্রন্থান্থ্রন্থা Khesar Gyalpo University of Medical Sciences of Bhutan Royal Government of Bhutan Thimphu: Bhutan



III. Details of all Past Professional Training (formal and informal). (if the space provided is not sufficient, use a separate sheet). Please start with the last Training.

•		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: (Signature of the Candidate)

Official use only

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



गेश्वरक्षाव्याचित्र्यम्भित्रम्। Khesar Gyalpo University of Medical Sciences of Bhutan Royal Government of Bhutan Thimphu: Bhutan



V. 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:

Department/Division

Signature

Name & Position Title

Seal of the Head of

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 Trainings, the original documents are to be retained with Agencies.

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