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| HUMAN RESOURCES DEANSHIP | **QUALITY MANAGEMENT SYSTEM** | Code:AHR-F-01-10 |
| Training course application form | *Edition****2*** | *Page**1 / 1* |

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| **Nomination form for training programs** |

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| **Personal data** | **The first is the last grandfather father.****Name (quadrant): ............ ............ ............ ............ Date of birth: / /** **Civil Registry Number**(Status Card):**:**The register number will appear in all documents and certificates issued by the Institute**Another scientific qualification: ...........................................** **Specialization: ..................................****E-mail: ...........................................** **Phone:****Mobile number:** |

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| **Program/programs (arranged according to priority training need)** |
| **Training need** | **The name of the program** | **Execution date** | **The name of the program** | **Execution date** |
| **1.**  |   | **6.**  |   |
| **2.**  |   | **7.**  |   |
| **3.**  |   | **8.**  |   |
| **4.**  |   | **9.**  |   |
| **5.**  |   | **10.**  |   |
| **The employee can nominate on programs that do not exceed the number of days of programs per training semester for (12) training days** |

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| **Functional data** | **Employer: .......................** **Management: .................** **Area: ........... City (or province): .............****The name of the job you actually do is: ..................................** **Filled date: / / Ranked: ( )****Date of entry into government office (date of appointment in the country): / / E** |

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| **Candidate's side** | **Direct Chair:****Job name: .................................****Name: ........................................ Signature: ........................ Date: / / 14H****In charge of training:****Job name: .................................****Name: ........................................ Signature: ........................ Date: / / 14H** |

directions:

1. The Institute accepts nomination through the automated system, and this paper form is used for nomination purposes within the entity.

2. No incomplete data request will be considered.

3. The civil registry number is written accurately and will appear in all the candidate's documents and certificates issued by the Institute.

4. Admission to the program/programs depends mainly on the compatibility of the program with the name of the job actually exercised by the candidate, and if the failure to do so is discovered, the Institute will have to ask these candidates to return to work.

5. The program/programs in the field of training need are determined on the basis of:

   Programs are arranged according to the priority of training needs.

   The employee can nominate on programs that do not exceed the number of program days per training semester for (12) training days.

   The maximum number of training days received by the employee is (12) days during the same year starting from the date of the first course obtained by the candidate.