Government of Pakistan
Finance Division
(Quality Assurance-I Section)
HRM Wing
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SUBJECT: - **THE MALTA COMMONWEALTH THIRD COUNTRY TRAINING PROGRAMME ON BANKING AND FINANCE IN SMALL STATES ISSUES AND POLICES FROM 11TH ~ 19TH APRIL, 2011 AT MALTA.**

All the officers of Finance Division are requested to visit the website of the Finance Division **(www.finance.gov.pk/trainings.html)** to obtain details regarding the subject training course, sponsored by ***University of Malta and the Banking and Finance Department of the same University, in collaboration with the Common Wealth Secretariat.*** And forward their nominations duly recommended by the AFS concerned. "Bio data Form, 'EAD Foreign Training Proforma' and Form GDI/1 is also available at the website which is required to be filled in by the nominee. The brief detail of the Course is as under:-

Subject	**THE MALTA COMMONWEALTH THIRD COUNTRY TRAINING PROGRAMME ON BANKING AND FINANCE IN SMALL STATES ISSUES AND POLICES.**
Duration	**11th ~ 19th April, 2011**
Objectives	
The aims of the program are as under: The aim of the workshop is to disseminate knowledge and provide training on banking and finance covering a variety of themes with a focus on small states, including regulatory frameworks and tax competition. The specific advantages and challenges faced by small states in the provision of financial services will also be discussed. A major objective of the workshop is to enable the participants to benefit from the sharing of ideas and experiences amongst each other during discussions.	
Eligibility criteria:	
The training course is intended for officials, at senior and middle management level operating in public and private sector institutions. Personnel from the Ministry of Finance, the Central Bank and those operating in financial regulation.	
Financial Status	**Sponsorship Information:** Selected applications will be provided with a scholarship funded by the Malta-Commonwealth Fund for Technical Co-operation. The Scholarship will cover the following costs: • Participants' course fees. • Accommodation for up to 10 nights; breakfast; lunch (course days only) at the designated course venue; and local transport. • Sponsored applicants will also receive a one-time partial subsistence allowance of E200. **No additional costs will be covered by the Government of Malta, the Commonwealth Fund for Technical Cooperation or Islands and Small States Institutes, University of Malta.** Nominating ministries will be responsible any additional costs, including:

	• Travel to and from Malta. • Fees and arrangements for visas to enter Malta. • Funds to cover sundry costs (telephone & internet usage; laundry costs, drinks at the bar etc). As a recommendation, E25 per day should be allowed. • Accommodation and living expenses beyond 10 days.
Dead Line fixed by the E.A.D.	**12-02-2011**
Dead Line to submit the nomination to **QA-I Section** duly recommended by AFS concerned along-with the Bio Data form GDI/1 form and EAD Foreign Training Proforma. Incomplete request will not be entertained.	**11-02-2011**

(Tasnim Bajwa)
Section Officer (QA-I)
Ph: 9208523

1. Accountant General, AGPR, Islamabad.
2. Joint Secretary (HRM), Finance Division, Islamabad.
3. Joint Secretary (Development), Finance Division, Islamabad.
4. Joint Secretary (PF), Finance Division, Islamabad.
5. Joint Secretary (Investment), Finance Division, Islamabad.
6. Joint Secretary (Expenditure), Finance Division, Islamabad.
7. Joint Secretary (Budget), Finance Division, Islamabad.
8. Joint Secretary (EF-P), Finance Division, Islamabad.
9. Joint Secretary (CF-I), Finance Division, Islamabad.
10. Joint Secretary (Imp), Finance Division, Islamabad.
11. Joint Secretary (CF-II), Finance Division, Islamabad.
12. Joint Secretary (ERU), Finance Division, Islamabad.
13. Joint Secretary (IF/BKG), Finance Division, Islamabad.
14. Joint Secretary (Regulations), Finance Division, Islamabad.
15. Joint Secretary (EF-C & B), Finance Division, Islamabad.
16. Principal Economic Advisor,(EA Wing), Finance Division, Islamabad.
17. Financial Advisor (Cabinet), Finance Division, Islamabad.
18. Financial Advisor (FBR), Finance Division, Islamabad.
19. Financial Advisor (Education), Finance Division, Islamabad.
20. Financial Advisor (Communication), Finance Division, Islamabad.
21. Financial Advisor (Water& power& W&P&NR), Finance Division, Islamabad.
22. Financial Advisor (Privatization Environment), Finance Division, Islamabad.
23. Financial Advisor (Planning & Development), Finance Division, Islamabad.
24. Financial Advisor (Interior), Finance Division, Islamabad..

Fin. Div. U.O.No.2 (1)/QA-I/2010, dated 11-02-2011

Copy to:-

1. PS to AFS (HRM), Finance Division, Islamabad.
2. PS to AFS (EF-P), Finance Division, Islamabad.
3. DS (QA), Finance Division, Islamabad.
4. Web Incharge, Finance Division, Islamabad with the request that the course may be inserted in the website of the Finance Division.

FORM GID/1

The Commonwealth Secretariat
GOVERNANCE & INSTITUTIONAL DEVELOPMENT DIVISION (GIDD)

NOMINATION

by the Government of _____

for a training course/study visit/training attachment/workshop* *(delete as applicable)*

for _____ *(name)*

in _____ *(subject field)*

due to start_____*(date if known)*

in_____*(country).*

This form (GID/1) should be completed for each nominee with a passport sized photo of the nominee.

Part I is to be completed by the nominee.
Part II is to be completed by the nominee's departmental head.

The form should then be endorsed below by an officer in the Government Ministry or Department designated as the Point of Contact (PoC) for the Governance & Institutional Development Division of the Commonwealth Secretariat, and posted or faxed to:

The Director
Governance & Institutional Development Division
The Commonwealth Secretariat
Marlborough House
Pall Mall
London SW1Y 5HX
United Kingdom Fax: 44 (0)20 7747 6335/6515

All correspondence with GIDD about this application will be through the PoC.

For Completion by the Government Designated Point of Contact:

I certify that this nomination has the endorsement of the Government and that to the best of my knowledge the details given in the application form are correct. *(If you are nominating more than one person for this programme please indicate an order of priority.)*

Signed: _____ Stamp of Department

Name: _____

Position: _____

Department/Ministry: _____

_____

Date: _____

FORM GID/1 Part I

The Commonwealth Secretariat
GOVERNANCE & INSTITUTIONAL DEVELOPMENT DIVISION (GIDD)

PERSONAL DETAILS To be completed by the nominee.

Please use BLOCK CAPITALS *or typewriter* **Circle as appropriate*

1. **Surname or family name:**

2. Forenames or personal names:

Please attach a photograph here

3. Title: Mr/Mrs/Miss/Ms/Dr/Other* ..... 4. Male/Female*

5. Date of Birth: Place of Birth:

6. Nationality (if different from passport):

7. **Home address:**

Phone: _____ Fax/E-mail: _____

8. **Work Address:**

Phone: _____ Fax: _____ E-mail/Telex: _____

9. **Passport Details:** Nationality: _____ Number: _____

Date/Place issued: _____ Type: _____ Expires: _____

10. Name & address of person to be contacted in an emergency *(including telephone number).*

Relationship of this person to you: _____

11. Have you ever travelled abroad before? If YES, give details.

12. Give details of any disability, or any medical condition which may require treatment during your training, or any dietary restrictions.

13. Please make an assessment of your ability in English (Circle as appropriate).

Reading: Excellent/Good/Average/Poor
Writing: Excellent/Good/Average/Poor
Speaking: Excellent/Good/Average/Poor

14. **Education Record**

If possible attach copies (NOT the originals) of your academic transcripts, etc. Include any professional attachments, short courses or workshops which you have attended. Indicate any courses currently being taken, expected date of completion, and the qualification to be obtained.

Institution	Location	Dates Attended From	Dates Attended To	Qualifications obtained & subjects studied

15. Please give details of any other professional qualifications not mentioned above.

16. **Employment Record**

Please list current occupation first and then your 2 previous posts.

Current Employer
(and nature of business):

Job Title: Dates:

Duties of the Post:

Previous Employer
(and nature of business):

Job Title: Dates:

Duties of the Post:

Previous Employer
(and nature of business):

Job Title: Dates:

Duties of the Post:

17. **Personal Statement**

Please describe briefly those aspects of your present work which relate to the training requested.
How will the training help?
Are there other skills which the training should cover?

18. **Undertaking**

I _____ *(name in CAPITALS)*

of _____ *(Country)* certify that the statements made by me in Part I of this form are true, complete, and correct to the best of my belief.

I also fully understand that if I am granted an award it may subsequently be withdrawn if I fail to make adequate progress, or for other sufficient cause determined by GIDD, my own, or the host Government. I undertake to return to my country after completion of the training programme.

Except as mentioned in 12 above, I confirm that I am in good health.

Signature: _____ Date: _____

FORM GID/1 Part II

The Commonwealth Secretariat

GOVERNANCE & INSTITUTIOANL DEVELOPMENT DIVISION (GIDD)

TRAINING REQUIREMENTS

To be completed by the employer.

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1. **Name of Nominee** _____

If others are nominated for this training please indicate their priority relative to the nominee.

Higher Priority	Equal Priority	Lower Priority
1.	1.	1.
2.	2.	2.
3.	3.	3.

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2. **Training Needs**

Please indicate the subject, nature, and level of the training requested.

Why is this training required? (Please indicate relevance to national development.)

Describe any particular problems which the training is intended to help solve.

(Continue on a separate sheet if necessary)

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3. **Content & Objectives of the Training** Please specify in as much detail as possible:-

- why the nominee was selected.

- what post he/she will fill on return.

- the skills you wish him/her to acquire.

(Continue on a separate sheet if necessary)

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4. **Other Sources of Assistance or Sharing of Costs**

Are you requesting assistance from elsewhere? Give details. Yes/No*

If partial assistance were offered by GIDD, is your Government or any other source prepared to meet any part of the cost? Please give details. Yes/No*

Complete either Section A for formal courses,
or Section B - study visits for training attachments
and the section on Costs.

A For formal courses

5. If you have a particular course in mind, please give:-
   - exact course title
   - institution & country
   - course start dates & duration (if known)

   Has an application been made by or on behalf of the nominee(s)? (If so, please give details and attach copies of any response, offer, or rejection. Yes/No

6. If you do not know of a particular course, please give (on a separate sheet) as much information as possible to assist in identifying a suitable programme; eg specific subject areas, specialisations, and possible countries or institutions.

B Study Visits & Attachments

7. If you know of any suitable places for the visit or attachment, please give details, including the address of the host organisation, dates/duration, details of the required training, and copies of any relevant correspondence.

8. If no approach has been made, please give details of the visits/experiences to which the nominee(s) should be exposed, with details of their present and future work. Include details of industrial processes, machinery or equipment used.

   (Continue on a separate sheet.)

9. **Anticipated Cost of Training**
   Please give anticipate costs for the training as shown below, indicating whether these are known, estimated, or unknown. (Please attach explanatory documents where appropriate.) **Please note that the absence of this information may delay Processing.**
   Travel
   Fees
   Subsistence Allowances
   Other costs *(specify)*

10. Please comment, if appropriate, on any answers given by the nominee in Part 1.

11. I confirm that I believe all the statements in this form to be correct.

Signed: _____ Position: _____

Name: _____ Date: _____ Organisation: _____

Government of Pakistan
Economic Affairs Division
(Foreign Training Proforma)
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1. Title of the Course		
2. Duration /Date	3. Venue	
4. Sponsored by	5. Source of Funding	
6. Ministries of who facility was circulated		
7.Eligibility Criteria		

8. Last date of submission of nomination Donor Agency EAD	9. Received letter date	10.Circulation date	11.Website date	12.No. of Slots

Name	**D/O Birth**	**Designation**	**Educational Qualification**	**Domicile**	**Present Professional responsibility**	**Previous foreign training courses (if any)**	**Date of joining into Govt: Services**	**Date of present posting**	**Remarks by the Desk Officer: Whether endorsed by the respective Provincial Govts. Or otherwise.**

SIGNATURE: _____

OFFICER'S BIO DATA FORM
(QA-I Section)

Sr. No.	Name , Designation & Wing	Educational Qualification	Date of Birth	Date of entry in Government service	Date of posting in Finance Division	Foreign/local training already availed during posting in Finance Division	Job Description	Please describe briefly those aspects of your present work which relate to the training requested.
1	2	3	4	5	6	7	8	9

(Officer's Signature)