

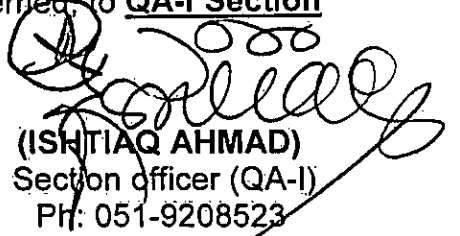
Government of Pakistan  
FINANCE DIVISION  
(HRM Wing)  
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**CIRCULAR**

Subject: - **04 DAY TRAINING WORKSHOP ON STRENGTHENING GOVERNANCE THROUGH ARTIFICIAL INTELLIGENCE (AI) ENABLED WHOLE OF GOVERNMENT (WOG) APPROACHES (9<sup>TH</sup> TO 12<sup>TH</sup> FEBRUARY, 2026)**

Establishment Division vide its O.M No.10(28)/2025-MSW-II dated 9<sup>th</sup> January, 2026 is planning to conduct a four-day Training / Workshop titled "Strengthening Governance through Artificial Intelligence (AI)-Enabled Whole-of-Government (WOG) Approaches" scheduled from 9<sup>th</sup> to 12<sup>th</sup> February, 2026 at Pakistan Planning & Management Institute (PPMI), Sector H-8/1, Islamabad. The timings during the aforementioned training/workshop shall be 08:30 AM to 02:30 PM.

2. All interested Officers (BPS-17 to BS-20) of Finance Division are requested to furnish their nominations duly filled in and signed application form (Annex-A) recommended from the AFS/head of the Wing concerned, to **QA-I Section** by **22.01.2026**.

  
(ISHFAQ AHMAD)  
Section officer (QA-I)  
Ph: 051-9208523

All Officers (BS-17 to BS-20), Finance Division, Islamabad  
Finance Division's U.O No.F.3 (4) QA-I/2014 dated 12.01.2026

Copy to:-

- Webmaster, with the request to upload the circular on this Division's website.



Government of Pakistan  
Cabinet Secretariat  
Establishment Division  
(Management Services Wing)  
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**NOMINATION FORM**

**04-DAY TRAINING/WORKSHOP ON**

**"STRENGTHENING GOVERNANCE THROUGH ARTIFICIAL INTELLIGENCE (AI)  
ENABLED WHOLE-OF-GOVERNMENT (WOG) APPROACHES"**

(9<sup>th</sup> – 12<sup>th</sup> February, 2026)

Nominating Organization: \_\_\_\_\_

Address of the Nominating Organization: \_\_\_\_\_

**Particulars of the Nominee:**

1. Name (in Block Letters): \_\_\_\_\_
2. Designation (With Pay Scale): \_\_\_\_\_
3. Date of Birth (With Year): \_\_\_\_\_
4. Address: (i) Office: \_\_\_\_\_  
(ii) Residence: \_\_\_\_\_
5. Telephone: Office: \_\_\_\_\_ Res: \_\_\_\_\_ Cell: \_\_\_\_\_  
Fax No.: \_\_\_\_\_ Email id: \_\_\_\_\_
6. Educational Qualification(s): \_\_\_\_\_
7. Training Received in M.S Wing, if any: \_\_\_\_\_
8. Date of Joining Service: \_\_\_\_\_
9. Group/Cadre/Service: \_\_\_\_\_
10. Date of Appointment to the Present Post: \_\_\_\_\_
11. Brief Description of Present Responsibilities: \_\_\_\_\_

Date: \_\_\_\_\_  
Place: \_\_\_\_\_

Signature of Nominee

**FOR OFFICIAL USE ONLY**

Reference no:  
Received on:  
Checked by:  
Approved /Not Approved

Signature (with name) & Stamp of  
Nominating Authority  
Telephone No.:  
Fax