

National Informatics Centre

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NIC-REC-TRG.03
Version 2.0

Nomination Form (Training)

Date _____

Group/Division/State _____ (If applicable)

Sub-division/Sub-State _____ (If applicable)

Course Code _____ Starting Date _____

Course Title _____

Applicant's Employee Code _____ Name _____

Designation _____

Pay Scale _____ Gazetted Non-Gazetted

Registration No. _____ (if allotted)

E-Mail Address _____

Name of Ministry _____ (e.g. Finance, Industry etc.)

Name of Department _____

Name of Organisation _____

Office Category Ministry Autonomous Semi Government
 Attached Office Others

Official Address _____

Telephone No. _____

Computer Related Experience NIL General Exposure Working Experience

Details of Experience

Signature of Applicant

Certified that the given particulars are verified and found to be correct. The applicant will be relieved only after receipt of acceptance letter from NIC.

Signature and Seal of Sponsoring Authority

For Paid Programme only

Cheque/Draft No. _____ Amount _____ Date _____