NATIONAL ACADEMY FOR TRAINING & RESEARCH IN SOCIAL SECURITY
(EMPLOYEES' PROVIDENT FUND ORGANISATION)
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NOMINATION FORM

Name of the Programme: Social Security Systems: Issues & Challenges
For CEOs of Social Security Organisations
Date: 5TH AND 6TH FEBRUARY 2009

1. **Name (in BLOCK letters)** :SURNAME:…… . MIDDLE NAME… … … …..... FIRST NAME:……
2. **Sex (Male / Female)** :……..
3. **Date of Birth (DD / MM / YY)**
4. 4. **Nationality** :……
5. **Educational & Professional Qualification** :……
   :……
6. **Name & Address of the Organisation** :……..……
   ……..
   ……..
7. **Designation (Present Title of your Job)** :……
8. **Working Experience (No. of Years)** :. ……..
9. **Telephone Nos.(with Country Code)** : Office:…… ..Residence:……..
   Mobile:……..Fax:…….
10. **E-mail address** : (i)Personnel :…….
    (ii)Office :…….
11. **Details of the Bank Draft** :i)DD No…….ii)Date……
    iii)Amount:…….
    iv) Bank's Name:……...
12. **What are your expectations from this programme**
    ……

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13. **Have you ever attended any Training/Workshop/Seminar at NATRSS. If yes, please indicate Name & date of the programme** : Yes / No
    ……..
    ……

- **Signature of Participant**:…….

15. Signature of the Sponsoring Authority certifying the above information :……