



**HUMAN RESOURCE MANAGEMENT DEPARTMENT  
GOVERNMENT HEADQUARTERS  
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**APPLICATION FORM FOR OVERSEAS TRAINING**

**INSTRUCTIONS FOR COMPLETING THIS FORM**

- I. Answer Section A-F
- II. Place a tick in the appropriate box
- III. Have your Head of Department/Supervisor complete Section G.

**Section A**

Name of the Scholarship for which you are applying.

\_\_\_\_\_

Course of study for which this application is being made:

\_\_\_\_\_

**Section B**

Mr./Mrs./Miss \_\_\_\_\_

Surname

First Name

Middle

Other Name(s) \_\_\_\_\_

Gender:

M

F

Home Address: \_\_\_\_\_

\_\_\_\_\_

Work Address: \_\_\_\_\_

\_\_\_\_\_

Telephone (s): Home \_\_\_\_\_ Work \_\_\_\_\_ Mobile \_\_\_\_\_

Email Address: \_\_\_\_\_

Please indicate where you want the correspondence sent:           H           W



**Section F**

Please sign and date this application after you have completed and read the following. I hereby certify that the information given in this application is true and correct.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date: (DD/MM/YYYY)

**Section G**

To be completed by persons working for government.

**Head of Department/Supervisor**

Please indicate your approval of your staff member's application for further study.

\_\_\_\_\_  
Make any necessary comments to support your decision in your answer given above.

\_\_\_\_\_  
Please sign and date this form.

\_\_\_\_\_  
Signature of H. O. D/Supervisor

\_\_\_\_\_  
Date: (DD/MM/YYYY)