Ministry:				Depai	rtment:				
Name					ank/Position	n	Employee No).	
Date of Appointment		Р	osting			Duties			
Email					Techni	echnical / Professional Training			
Address:									
Academic Qualificatio	ns (to i		es currently						
Type of Awar	d App	lying For (բ	olease indi	cate wi	th a tick i	n the app	propriate box)		
Full In-Service (Abroad)				Full In-S	ervice (Loc	(Local)			
Partial/Limited In-Service		Partial/L	imited In-S	In-Service (Salary & Tuition)					
Unpaid Study Leave				Education	onal Loan	an			
Special Leave (under 12 r	nonths)							
Studies Pursuing (e.g. Certification, Associates, Bachelors, Masters)		Area of S	Study (please	be specific)		Name and	I Address of Institu	ution	
Commencement Date Is	Schoo	ol accredited?	?						
			es []No						
Estimated Length of St	udv		ptance Letter Received?			Estima	ated Annual Tuitio	n	
Latimated Length of St	uuy	-	[] Yes []			(please provide proof)			
					letter)				
			e enclose acc		ollo/)				
Please give name of three	e (3) su	reties and ad	dresses:						
Name			Address / P.O. Box / Telephone Number						
Briefly state how you wi	ll apply	vour studies	s upon vour i	return an	d how this	will benefi	t the organisation.		
Shorty state new years.	чрр.у	your orauloc	, upon your i	otarri un			t ino organication.		
Applicant's Signature						Date			
Applicant 3 Dignature						Date			

PART B – TO BE COMPLETED BY THE STUDY LEAVE SELECTION BOARD

Date of Meeting		Venue of Meeting						
Board Members Present								
Comments/Points to Consider								
Is Study Leave in a Priority Are	ea at relevan	t Ministry / Department? [] Yes						
Is Study Leave in a Priority Area at relevant Ministry / Department? [] Yes [] No Board's Recommendation								
Full In-Service (Abroad)		Full In-Service (Local)						
Partial/Limited In-Service (Salary Only)		Partial/Limited In-Service (Salary & Tuition)						
Unpaid Study Leave		Educational Loan						
Special Leave (under 12 months)		Defer						
Deny								
Comments								
A LEG and O annual for Annual and Brownia		Per						
Additional Comments for Applicants Pursuir Board's Recommendation:	Comment	dies						
	Oomment							
Draft Cabinet Paper								
Financial Implications for Approved Awa	ards	The following are attached:						
Tuition		Please tick the boxes	7					
Air Fare (approximate)			_					
Training Allowance		2. Proof of Tuition						
Full In-Service Award (Abroad) Book Allowance		3. Financial Clearance	7					
Full In-Service Award (Local)		(if applicable)						
Additional Funds		4. Names of three (3) sureties / addresses	7					
Total	\$	(if applicable)	_					
	1	5. Current Performance Appraisal						
Signature of Board Chairman		Data						
Signature of Board Chairman		Date						
Signature of Board Secretary		Date						
,								