MOST URGENT

GOVERNMENT OF TELANGANA
DEPARTMENT OF TECHNICAL EDUCATION

Cir. Memo. No. T1/11195/ 2015

Dt:-30-11-2017

Sub:- TECHNICAL EDUCATION – The Training Programme on
“Website Development Using PHP” Scheduled from
for by the Dr. MCRHRDI, Hyderabad – Reg.
Ref:- 1.Memo No. 6503/OP&MC/A2/2017, Dt: 24.11.2017 received
from Govt. of Telangana, Higher Education (OP) Dept.
2.Lr. No. T2/CIT/SR/844/2017-1, Dt: 20.11.2017, received
from Dr. MCRHRDI, Hyderabad.

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With reference to above cited, the Secretary SBTET, RJD(TE)
Hyderabad and all the Principals of Govt. Polytechnics of Telangana state
are hereby informed that Dr. MCRHRDI, Hyderabad is conducting Training
Programme on “Website Development Using PHP” Scheduled from
18.12.2017 to 23.12.2017 (6 Days). They are requested to circulate
the same among the Gazetted officers and Staff members and send
nominations for the training programme immediately from officers who
are interested in the proforma enclosed to this office to take further action
in the matter. They may send the nomination to adtrg.ts@gmail.com on
or before 2 PM on 01.12.2017 in order to submit for Dr. MCRHRDI,
Hyderabad on or before 04.12.2017.

Endl: Nomination from

Sd/- U.V.S.N.MURTHY
For COMMISSIONER

To
The Principals of All Govt. Polytechnics under control
of Department of Technical Education.
Copy to Secretary, SBTET, TS, Hyderabad.
Copy to RJD of Technical Education, Hyderabad.
Copy to Stock File / Spare.

//F.B.O//

SUPERINTENDENT
Dr. MCR Human Resource Development Institute, Hyderabad
(An Institution included under Schedule – X of the A.P. Reorganisation Act 2014)
(http://www.mcrhrdi.gov.in)

NOMINATION FORM

1. Programme Name:
   (Mention the Programme for which Nomination is being sent)

2. Programme Date  From: To:

3. Name of the Candidate:
   (Capital letters)

4. Designation:

5. Department:

6. Date of Birth:

7. SC/ST/OBC/Others:

8. Basic Pay/Scale of Pay:

9. Academic Qualifications & Professional Qualifications:

10. No. of Years of Service in Govt.,

11. Experience Profile:

12. Address for Communication (Office):

   Fax(O): Phone No.(O) (Mobile No.) (Email-ID)

Signature of the Candidate

TO BE FILLED IN BY THE NOMINATING AUTHORITY TO RECEIVE CONFIRMATIONS (Mandatory)

1) Name:
2) Address:
3) Office Phone No:
4) Fax No:
5) Email-ID:

Certified that:

a. The Particulars given above are correct
b. Due care has been taken of the training needs of the office nominated with reference to
   his present/future duties viz-a-viz the contents of the course
   c. The officer, if selected, will be relieved on full-time basis for attending the programme

Signature of the Nominating Authority with Seal