



Ministry of Health, Wellness,
Human Services & Gender Relations
Sir Stanislaus James Building
Waterfront, Castries

10TH EDF NIP

Surname: First Name: Middle Name:

Date of Birth: DD/MM/YYYY Nationality: NIC #: Sex: M ☐ F ☐

Home Address: _____

Mailing Address: _____

Home Tel #: _____ Work Tel #: _____ Mobile #: _____

Email Address:

Staff ID: _____ Position: _____

Date Appointed to Current Post: DD/MM/YYYY Date Entered Service: DD/MM/YYYY

Monthly Salary: _____ Grade: _____ Weekly Wages: _____

Department:

Place of Work: _____ Region: _____

Employment Status: Permanent: ☐ Contract: ☐ Wages/Temporary: ☐

Current Roles & Responsibilities:

[illegible]

EDUCATIONAL ACHIEVEMENTS

	Educational Institution	Qualifications Attained	Year of Graduation
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

Have you ever been the recipient of a scholarship award or financial assistance to pursue a study programme?

Yes ☐ No ☐

If yes, please indicate the following:

Funding Agency: _____

Area & Level of Study: _____

Start Date: DD/MM/YYYY End Date: DD/MM/YYYY Duration: Days Weeks Months Years
(Circle Appropriate)

Type of Award: Full-Scholarship ☐ Partial-Scholarship ☐ Financial Assistance ☐

If you received a partial-scholarship or financial assistance, please give details: _____

TRAINING INFORMATION

Area of Study: _____

Level of Study: Associate Degree ☐ Professional Certificate ☐ Diploma ☐
Master's Degree ☐ Bachelor's Degree ☐ Certificate ☐

Educational Institution: _____

Country: _____

Start Date: DD/MM/YYYY End Date: DD/MM/YYYY Duration: _____

Delivery Mode: Full-Time ☐ Online ☐ Modular (online & on-site) ☐ Part-Time ☐

Brief statement of purpose for applying for this training programme: (attach separate sheet if necessary)

Date _____

Signature

Name: _____ Position: _____

Name: _____ Position: _____

Officer Recommended for Training?

Yes ☐No ☐

Date _____

Approval: Approval will be confirmed in writing, prior to the course commencement date, and is subject to:

Approval: Approval will be confirmed in writing, prior to the course commencement date, and is subject to:

- All applications will be reviewed by the HR Committee of the Ministry of Health for final selection and approval

Bonding: All successful applicants will be subject to bonding as per Public Service Rules and Regulations.

Tuition Fees: Applicants are required to submit a copy of the Fee Schedule from their chosen educational institution.

Page 3 of 3