

**Application of SLEAS Officers for Short term Foreign Training**

1. Name of the Officer (with Initials): .....  
.....
2. Full Name :: .....  
.....
3. Date of Birth: ...../...../.....
4. Age on 01<sup>st</sup> November 2018: .....
5. Official Address: .....  
.....
6. Personal Address: .....  
.....
7. E- Mail Address: .....
8. Telephone No: .....
9. Date of Appointment: .....
10. Service confirmation Date: .....
11.
  - a. Carder of SLEAS : .....
  - b. Subject : .....
  - c. Date Appointed as ICT Coordinator : .....

12. Details of Previous Foreign Tours granted by the government (If any)

Year	Duration	Country	Reason

13. Details about Personal Foreign leave / Legal study leave / No pay Leave

Duration	Reason for the Leave

14. Education & Professional Qualifications

14.1 Education Qualification

Qualification	Institute	Year

14.2 Professional Qualification

Qualification	Institute	Year

14.3 Qualification Related to ICT

Institute	Diploma/ Degree	Year	Duration

15. Service rendered to the Education System

- National Level
- Provincial Level
- Zonal Level

16. I state that the above details are true & correct according to my knowledge and belief.

.....  
Date

.....  
Signature