

### पंडितदीनदयालउपाध्यायराष्ट्रीयसामाजिकसुरक्षाअकादमी PANDIT DEENDAYAL UPADHYAYA NATIONAL ACADEMY OF SOCIAL SECURITY

## भविष्य निधि संगठन, श्रम एवं रोज़गार मंत्रालय, भारत सरकार EMPLOYEES' PROVIDENT FUND ORGANISATION MINISTRY OF LABOUR AND EMPLOYMENT, GOVERNMENT OF INDIA



No V10/13/1/2024-25/TDP/Facilitation/PDNASS/ 194

Date:

1 6 JUL 2024

All Additional Central Commissioners (Zones)

All In-Charge of Regional/Sub-Regional Offices/ZTIs

Subject: Nomination for DoPT sponsored Three days Facilitation training programme scheduled to be held in PDNASS from 05.08.2024 to 07.08.2024-Reg. Madam/Sir,

Pandit Deendayal Upadhyaya National Academy of Social Security (PDNASS) is organizing a national level Three days On-Campus training programme on Facilitation from 05.08.2024 to 07.08.2024 sponsored by Department Personnel & Training (DoP&T),Govt. of India for the calendar year 2024-2025.

- 2. The aim of the Facilitation course is to provide an opportunity for the trainers to develop their basic instructional skills to enable them to make an effective contribution to their institution's training courses. The trainers are the certified recognized Master Trainers (MTs)/ Recognized Trainers (RTs) of Govt. of India. The Course is fully residential. Pandit Deendayal Upadhyaya National Academy of Social Security (PDNASS) has modest hostel facility. As per DoPT instructions, no course fee will be charged; TA/DA in respect of the participants to be borne by the sponsoring authority/organization.
- 3. You are requested to kindly give willingness of yourself and your subordinate officers for the above courses at the earliest possible so that we would be able to make the selection of the officers and necessary arrangements. Nomination form for is enclosed. The nomination dully filled in the specific format should reach PDUNASSby 24.07.2024 through email at <a href="mailto:natrss@epfindia.gov.in">natrss@epfindia.gov.in</a> to enable us to make proper arrangements for the participants. After scrutiny of the application, the Department/Organisation/Institution will be informed and the selected participants will be provided the course material in advance to enhance the learning process. The Nominee MUST NOT be relieved to attend the course till their participation is confirmed by PDUNASS.
- 4. For any further information about PDUNASS or training programmes, please feel free to contact at Email <a href="mailto:natrss@epfindia.gov.in">natrss@epfindia.gov.in</a>The application for nomination of participants and sponsoring Authority's confirmation format may also be downloaded from EPFO Website with URL <a href="https://www.epfindia.gov.in">www.epfindia.gov.in</a> (Please circulate this communication among all officers in your RO/SROS).
- 5. For any further information, please contact on +91 9911122932. The application for nomination of participants and sponsoring Authority confirmation format are enclosed.

Yours faithfully,

(Sanjay Kumar Rai)

Regional Provident Fund Commissioner-I



# पंडित दीनदयाल उपाध्याय राष्ट्रीय सामाजिक सुरक्षा अकादमी PANDIT DEENDAYAL UPADHYAYA NATIONAL ACADEMY OF SOCIAL SECURITY



## भविष्य निधि संगठन, श्रम एवं रोज़गार मंत्रालय, भारत सरकार EMPLOYEES' PROVIDENT FUND ORGANISATION MINISTRY OF LABOUR AND EMPLOYMENT, GOVERNMENT OF INDIA

#### NOMINATION FORM

Course name	Venue	Date
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You may use photocopies of this form. Please complete in capital letters. Strike off items not applicable. Nominations should be submitted at least <u>1</u> weeks prior to the course dates to host institute.

### NOMINEES INFORMATION

1	Name	
2	Designation	Since(date)
3	Department/ Institute/organization	
4	Scale of Pay	
5	Date of birth	
6	Sex:	Male/Female
7	Category:	SC/ST/General/OBC
8	Address for communication (with Pin Code) e-mail address	,
9	FAX Number	
10	Telephone Number, Mobile, e-mail address	
11	Relevance of the training programme to the officer	
12	Details of other "Training of Trainers (ToT)" Courses attended, with dates	



# पंडित दीनदयाल उपाध्याय राष्ट्रीय सामाजिक सुरक्षा अकादमी PANDIT DEENDAYAL UPADHYAYA NATIONAL ACADEMY OF SOCIAL SECURITY



### भविष्य निधि संगठन, श्रम एवं रोज़गार मंत्रालय, भारत सरकार EMPLOYEES' PROVIDENT FUND ORGANISATION MINISTRY OF LABOUR AND EMPLOYMENT, GOVERNMENT OF INDIA

#### NOMINATION FORM

Course name	Venue	Date
* 1		

### **Sponsoring Authority's Confirmation**

1	Name of sponsoring authority	
2	Address for communication (with Pin Code)	
3	Telegraphic Address, e- mail	
4	Telephone Number	
5	Fax Number	
6	How does the nominee's participation relate to the training and development plan and policy of the sponsoring authority?	
7	Please give details of those you have sponsored for this course in the past, and any feedback you have taken from them on benefits to them and the organisation	

Certified that the given particulars are correct, the nomination is made after ascertaining the training needs of the nominee, and if selected the nominee will be relieved on full time basis for the programme.

Date