



**Lumbini Province  
Province Training Academy (PTA)  
Nepalgunj- Banke**



**APPLICATION FORM FOR THE ROSTER OF EXPERTS/RESOURCE PERSON**

**Background**

Province Training Academy (PTA) Lumbini Province has been established under Province Training Academy Act, 2077 B.S. as an autonomous knowledge center that aims at enhancing the competency of elected, nominated and appointed officials and the personnel working primarily in Provincial and the Local Governments; and supporting Provincial and Local governments in implementing developmental and governance reform programs by creating new knowledge and contributing to existing knowledge-base through research, studies and practical experiences. The Academy aims to be a **Center of Excellence** for competent Provincial Government and well versed Local Levels; and conducts quality training, on-site coaching, mentoring and action research.

The Academy mobilizes competent professionals to achieve its objectives; and invites application for the roster from qualified experts (individuals). The individuals who meet the qualifications and experiences and are interested to work with Academy are requested to fill up the form below and submit to Academy through the email: [ptalumbini@gmail.com](mailto:ptalumbini@gmail.com). Incomplete forms will not be accepted.

**(1) Personal Information:**

Family name: \_\_\_\_\_ First name(s): \_\_\_\_\_ Middle Name: \_\_\_\_\_

Nationality: \_\_\_\_\_ Date of birth (year): \_\_\_\_\_ Sex:  M  F

Present Status: Freelancer  Employed

If employed, employed by: \_\_\_\_\_

Department: \_\_\_\_\_

Position/title: \_\_\_\_\_

Contact information

Office

Residence

Street/Ward: \_\_\_\_\_ Street/Ward: \_\_\_\_\_

City : \_\_\_\_\_ City : \_\_\_\_\_

Country: \_\_\_\_\_ Country: \_\_\_\_\_

Tel: \_\_\_\_\_ Tel: \_\_\_\_\_

Fax:	Mob:
E-mail:	E-mail:

**(2) Academic Qualification**

Degree	Subject	University/School	Year of Completion	Specialization

**(3) Field of Expertise**

Select the areas of expertise that best fit to your experience and expertise **(Select maximum 10 areas)**.

S.No.	Areas of Expertise	Please tick <input checked="" type="checkbox"/>
1	Governance, Local Governance and Federalism	
2	Action Research and Citizen Led Development Approach	
3	Project Cycle Management (PCM)	
4	Local Planning/Periodic Planning/Mid-term Expenditure Framework	
5	Development Management	
6	Localization of Sustainable Development Goals (SDGs)	
7	Policy Formulation	
8	Public Financial Management (PFM) and Public Procurement	
9	Fiscal Decentralization and Intergovernmental Fiscal Transfer	
10	Gender Equality and Social Inclusion (GESI)	
11	Disaster Risk Management (DRM)	
12	Organizational Development (Org. Assessment, Action planning)	
13	Human Resource Management	
14	Information Technology	
15	Knowledge Management	
16	Infrastructure Standards and Building Code	
17	Law, Justice and Human Rights	
18	Public Services Delivery	
19	Research and Innovation	
20	Social Accountability (SA) /SA Tools i.e Public Audit, Public hearing	

	Social Audit, Community Score Card, Exit pool,....	
21	Entrepreneurship, Social Enterprises and Inclusive Local Economies	
22	Training Approaches and Facilitation for Social Change	
23	Leadership development/Team building /Interpersonal Communication Skills	
24	Proposal ad Report Writing	
25	Others (Please Specify .....)	

**(4) Experience**

Please state briefly your experience in relation to the section (3) above.

S. No.	Organization	Position	Start Date	End Date	Major Roles

**(5) Skills**

Please complete the appropriate sections below in accordance with your mastery of skill and proficiency.

a. Training Design and Curriculum Development

Professional	Moderate	Basic	None

b. Training/Workshop Facilitation

Professional	Moderate	Basic	None

c. Post-Training Support, On-Site Coaching, Follow-Up

Professional	Moderate	Basic	None

d. Research and Analysis

Professional	Moderate	Basic	None

e. Planning and Strategy Formulation

Professional	Moderate	Basic	None

f. Providing Consultancy Services

Professional	Moderate	Basic	None

(1) **Delivered relevant training (Training Name, number of events, organization, level of participants)**

(2) **List of Relevant Publications (Title, Year of Publication, Publisher)**

(3) **Participation in Training Courses (Major and Strategic Only)**

(4) **language Proficiency**

Tick each language that you know and put appropriate numbers for Read, Write, Speak and Understand according to your proficiency: **1 - Fluently; 2 - Well; 3 - With difficulty; 4 - Not at all**

Language	Read	Write	Speak	Understand
<input type="checkbox"/> Nepali				
<input type="checkbox"/> English				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				

**(5) Other Relevant Information (if any)**

**(6) Declaration**

I AGREE to the consent to collection, usage and disclosure of personal information for the purpose mentioned above.

Signature

Date

\_\_\_\_\_

\_\_\_\_\_

**Please submit at:** ptalumbini@gmail.com

Contact No.: 081- 527975/9858034975