Photo

**Lumbini Province**

**Province Training Academy (PTA)**

**Nepalgunj- Banke**

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

**Background**

Province Training Academy (PTA) Lumbuni 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 andwell 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 | |
| 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: | | | |
| PAN no**:** | | | | |  | | | |

1. **Academic Qualification**

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| |  |  |  |  |  | | --- | --- | --- | --- | --- | | Degree | Subject | University/School | Year of Completion | Specialization | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |

1. **Field of Expertise**

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

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| --- | --- | --- |
| **S.No.** | **Areas of Expertise** | **Please tick 🗹** |
| 1 | Governance, Local Governance and Federalism |  |
| 2 | Fiduciary Risk Reduction Action Plan (FRRAP) in LGs |  |
| 3 | Project Cycle Management (PCM) |  |
| 4 | Local level planning and monitoring |  |
| 5 | Mid-term Expenditure Framework (MTEF) |  |
| 6 | Localization of Sustainable Development Goals (SDGs) |  |
| 7 | Public Financial Management (PFM) and Public Procurement |  |
| 8 | In-Service training to Province and LG's staff |  |
| 9 | Service Entry Training to Province and LG's staff |  |
| 10 | Gender Equality and Social Inclusion (GESI) |  |
| 11 | Work place Harassment training and code of conduct preparation |  |
| 12 | Disaster Risk Management (DRM) |  |
| 13 | Environment Friendly Local Governance (EFLG) |  |
| 14 | Local Government Institutional Capacity Assessment (LISA) |  |
| 15 | Information Communication Technology |  |
| 16 | Capacity Development of Judicial committees of LGs |  |
| 17 | Mediation training (ToT) to Local level mediators |  |
| 18 | Public Services Delivery of LGs |  |
| 19 | Social Accountability (SA) /SA Tools i.e Public Audit, Public hearing |  |
| 20 | Leadership development/Team building /Interpersonal Communication Skills |  |
| 21 | Appreciative Inquiry |  |
| 22 | Proposal and Report Writing |  |
| 23 | Others (Please Specify ………………………….) |  |

1. **Experience**

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

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| **S. No.** | **Organization** | **Position** | **Start Date** | **End Date** | **Major Roles** |
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1. **Skills**

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

1. Training Design and Curriculum Development

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| --- | --- | --- | --- |
| **Professional** | **Moderate** | **Basic** | **None** |
|  |  |  |  |

1. Training/Workshop Facilitation

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| --- | --- | --- | --- |
| **Professional** | **Moderate** | **Basic** | **None** |
|  |  |  |  |

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

|  |  |  |  |
| --- | --- | --- | --- |
| **Professional** | **Moderate** | **Basic** | **None** |
|  |  |  |  |

1. Research and Analysis

|  |  |  |  |
| --- | --- | --- | --- |
| **Professional** | **Moderate** | **Basic** | **None** |
|  |  |  |  |

1. Planning and Strategy Formulation

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| --- | --- | --- | --- |
| **Professional** | **Moderate** | **Basic** | **None** |
|  |  |  |  |

1. Providing Consultancy Services

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| --- | --- | --- | --- |
| **Professional** | **Moderate** | **Basic** | **None** |
|  |  |  |  |

1. **Delivered Relevant Training/Workshop/Assignments (Assignment Name, Number of Events, Organization, Level of Participants)**

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| |  |  |  |  |  | | --- | --- | --- | --- | --- | | S.N. | Training/Assignment Name | Number of Event/LGS | Level of Participants | Organization | | 1 |  |  |  |  | | 2 |  |  |  |  | | 3 |  |  |  |  | | 4 |  |  |  |  | | 5 |  |  |  |  | | 6 |  |  |  |  | | 7 |  |  |  |  | | 8 |  |  |  |  | |

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

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| |  |  |  |  | | --- | --- | --- | --- | | S.N. | Title | Year of Publication | Publisher | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |

1. **Participation in Training Courses (Major and Strategic Only/relevant ToT)**
2. **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** |
| Nepali |  |  |  |  |
| English |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1. **Other Relevant Information (if any)**

1. **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