

मानव संसाधन प्रबंधन एकक  
भारतीय कृषि अनुसंधान परिषद  
कृषि अनुसंधान भवन- II, नई दिल्ली

F. No. HRM-3(10)/2020-KAB/123

Dated: 23<sup>rd</sup> Oct., 2020

**OFFICE MEMORANDUM**

**Subject:- Nomination for online Training Programme/Workshop on “Establishment Rules-2 (ER-2-02)” to be held from 23-27 November, 2020 at ISTM, New Delhi.**

The Institute of Secretariat Training and Management (ISTM), New Delhi has invited nominations for the online training programme/wprkshop on “Establishment Rules-2 (ER-2-02)” to be held from 23-27 November, 2020 at ISTM, New Delhi. The course is designed for officials at the level of Section Officer and Assistant Section Officers (of CSS) or equivalent level in other offices of Central Government, State Government, UT Administration, PSUs, Constitutional Bodies, and Autonomous Bodies etc. The Officers who are desirous to attend this programme may send their nomination in the prescribed nomination form through proper channel to HRM Unit, ICAR HQs latest by **05.11.2020** as per ATP 2020-21 for onward transmission to ISTM, New Delhi. The Nomination Form may be downloaded from ICAR website under col. Circular/HRM Unit. The nomination may not be sent online directly to ISTM until it is approved by the Council.

The Officers who have already attended this training programme need not apply. The applicant will not be allowed to withdraw their nominations after acceptance by ISTM, New Delhi. The participation in the above programmes will be subject to acceptance of nomination by ISTM and also further orders from the Council.

*Suman*  
23/10/2020  
(A. K. Vyas)

**ADG (HRM) &  
Training Manager, ICAR**

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Encl.: As above.

**Distribution:-**

1. All Officers/ Sections of ICAR HQs.
2. AII Directors of ICAR Institutes/PDs
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# Institute of Secretariat Training & Management

## Online Nomination Form

Participants 1 of 1

\*Select Course

\*Have you previously attended any course at ISTM?  Yes  No

\*Mobile No.

\*First Name  Middle Name  \*Last Name

Name in Hindi  \* Father's / Spouse's / Mother's / Guardian's name

\*Gender  \*Category

\*Differently Abled  Yes  No

\*Date of Birth  \* Educational Qualification

\* Service  \* Designation / Rank

\*Level of Pay Matrix

\*Date of Joining Service  \* Date of Joining Current Post

\* Brief Service Particulars

### ORGANISATION DETAILS

\* Organisation Name  \* Organisation Type

\* Organisation Email  \*Organisation Phone

\* Organisation Street Address

\* Organisation City  \*Organisation Pincode

\* Organisation State

### PERSONAL / RESIDENCE DETAILS

Aadhaar Number  \*Email

\* Street Address

\* City  \* Pincode

\*State

### OTHER DETAILS

\* Emergency Contact Details

\*How the training is likely to benefit the nominee as well as the organisation (in 2 lines).

Whether Hostel Accommodation is required  Yes  No

\*I certify that the above information is correct

( Checked = Yes; Unchecked = No; )

This form is to be filled up by the candidate and submitted to the Institute of Secretariat Training & Management, Govt. of India. The form is to be filled up by the candidate and submitted to the Institute of Secretariat Training & Management, Govt. of India.

Enter Image Characters

