



Government of Pakistan  
Cabinet Secretariat  
Establishment Division  
(Management Services Wing)  
\*\*\*\*\*

**NOMINATION FORM**

**04-DAY TRAINING/WORKSHOP ON**

**“STRENGTHENING GOVERNANCE THROUGH ARTIFICIAL INTELLIGENCE (AI)  
ENABLED WHOLE-OF-GOVERNMENT (WOG) APPROACHES”**

**(9<sup>th</sup> – 12<sup>th</sup> February, 2026)**

**Nominating Organization:** \_\_\_\_\_

**Address of the Nominating Organization:** \_\_\_\_\_

**Particulars of the Nominee:**

1. **Name** (in Block Letters): \_\_\_\_\_

2. **Designation** (With Pay Scale): \_\_\_\_\_

3. **Date of Birth** (With Year): \_\_\_\_\_

4. **Address:** (i) Office: \_\_\_\_\_

(ii) Residence: \_\_\_\_\_

5. **Telephone:** Office: \_\_\_\_\_ Res: \_\_\_\_\_ Cell: \_\_\_\_\_

**Fax No.:** \_\_\_\_\_ **Email id:** \_\_\_\_\_

6. **Educational Qualification(s):** \_\_\_\_\_

7. **Training Received** in M.S Wing, if any \_\_\_\_\_

8. **Date of Joining Service:** \_\_\_\_\_

9. **Group/Cadre/Service:** \_\_\_\_\_

10. **Date of Appointment to the Present Post:** \_\_\_\_\_

11. **Brief Description of Present Responsibilities:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Place:** \_\_\_\_\_

**Signature of Nominee**

**FOR OFFICIAL USE ONLY**

Reference no:

**Received on:**

**Checked by:**

Approved /Not Approved

**Signature (with name) & Stamp of Nominating Authority**

Telephone No.:

Fax