

বিজ্ঞপ্তি

Thai-Bangladesh Human Resource Development Programme এর আওতায় রাজকীয় থাই সরকারের অর্থায়নে থাইল্যান্ডে অনুষ্ঠেয় ১-২ বছর মেয়াদী Economics বিষয়ে Master Degree Programme-এ প্রাপ্ত ২টি সুযোগে অংশগ্রহণের জন্য জনপ্রশাসন মন্ত্রণালয়ে কর্মরত ও এর আওতাধীন মাঠ পর্যায়ে কর্মরত কর্মকর্তাবৃন্দের নিকট থেকে দরখাস্ত আহবান করা যাচ্ছে:

২। আলোচ্য প্রোগ্রামে আবেদনের জন্য নিম্নবর্ণিত যোগ্যতা থাকতে হবে:

- Be in good health, both physically and mentally
- Possess at least a Bachelor's degree which is related to the applying course and obtain a cumulative GPA at least 3.00
- Have at least 3 years of working experience which is related to the applying course
- Have a good command of written and spoken English
- Be endorsed by the applicant's working agency or company and nominated by Bangladesh Government.

এছাড়া উক্ত প্রোগ্রামে আবেদনের জন্য নিম্নবর্ণিত কাগজপত্র প্রয়োজন হবে:

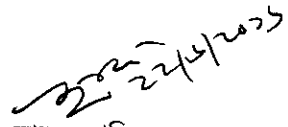
- Three copies of TICA Application Forms (typed only), each affixed with photographs
- Two letters of recommendation
- Three copies of official transcripts of studies (mark sheets) in English
- Three copies of degree certificates in English
- Document showing your current TOEFL score (of 500 or higher) or other English language proficiency tests (e.g. IELTS)
- Health Certificate
- Copy of applicant's passport (if possible)
- Proposal.

অন্যান্য শর্তাবলী:

- চাকুরিকাল ৫ বছর পূর্তি হতে হবে ও চাকুরিতে স্থায়ী হতে হবে;
- সংশ্লিষ্ট কোর্সের সংশ্লিষ্ট প্রার্থীর কাজের সম্পূর্ণতা থাকতে হবে;
- প্রার্থীর ইংরেজীতে পারদর্শী এবং শারীরিক উপযুক্ততা থাকতে হবে;
- আগ্রহী ও যোগ্য কর্মকর্তাবৃন্দকে সংযুক্ত (বাংলা) ফরম ও কোর্সের আবেদন ফরম পূরণ করে ফরমসমূহ চাহিত সংশ্লিষ্ট কাগজপত্রসহ মোট ৫ সেট হার্ডকপি আগামী ২৮/০৬/২০১৬ তারিখের আবশ্যিকভাবে নিম্নস্বাক্ষরকারীর দপ্তরে প্রেরণ করতে হবে।
- অসম্পূর্ণ বা বিলম্বে প্রাপ্ত আবেদন বাতিল বলে গণ্য হবে;

সংযুক্ত: (১) আবেদন ফরম

(২) TICA Application form.


ড. আবদুল হামিদ
উপসচিব
ফোন: ৯৫৭৪৪২৬

Thai-Bangladesh Human Resource Development Programme এর আওতায় নির্দিষ্ট
প্রশিক্ষণে অংশগ্রহণের জন্য আগ্রহী কর্মকর্তার তথ্যাবলী:

১.	নাম :	
২.	পরিচিতি নং (যদি থাকে) :	
৩.	পদবী ও বর্তমান কর্মস্থল :	
৪.	ক্যাডার সার্ভিসের নাম :	
৫.	জন্ম তারিখ : ও বয়স :	
৬.	চাকুরিকাল :	
৭.	সর্বশেষ শিক্ষাগত যোগ্যতা :	
৮.	ইতঃপূর্বে বিদেশ প্রশিক্ষণ/উচ্চশিক্ষা গ্রহণ করলে তার বিবরণ :	
৯.	মোবাইল নম্বর : ও ই-মেইল এড্রেস :	
১০.	পাসপোর্ট নম্বর : ও মেয়াদ :	

সুপারি করা হলো

স্বাক্ষর ও সীল

নিয়ন্ত্রণকারী কর্তৃপক্ষের স্বাক্ষর ও সীল



Ministry of Foreign Affairs
Thailand International Development Cooperation Agency (TICA)
Government Complex, Building B (South Zone), 8 th Floor,
Chaengwattana Road, Bangkok 10210, Thailand
Tel. 66 2203 5000 ext. 43305 Fax 66 2143 9325, 2143 8451
Email: tica@mfa.go.th Website: www.tica.thaigov.net

FELLOWSHIP APPLICATION FORM

<p>INSTRUCTIONS</p> <p>This application form is composed of five parts (part A to part E) and should be completed <u>in triplicate</u>. Part A to part D should be completed by the candidate and part E by the government authority. All parts must be filled in typewritten form. Each question must be answered clearly and completely. Detailed answers are required in order to make the most appropriate arrangements. Official authority of the nominating Government will then forward three copies of the certified application forms to the Thailand International Development Cooperation Agency (TICA), the Government Complex, Building B (South Zone), 8th Floor, Chaengwatta Road, Laksi, District Bangkok 12010, Thailand, through the Royal Thai Embassy or Consulate in the nominating country. The nominee is required to attach medical report or health status certification. No consideration will be given to the late submissions or incomplete applications/documents.</p>	(Please attach)				
Course Name:					
A. PERSONAL HISTORY					
Title	Family name (as shown in passport and kindly attach the copy of your passport, information will be used for travel arrangement)	Middle name	Given name	Sex	
<input type="radio"/> Mr. <input type="radio"/> Mrs. <input type="radio"/> Ms.				<input type="radio"/> Male <input type="radio"/> Female	
City and country of birth	Nationality	Date of birth (DD/MM/YY)	Age	Marital Status	Religion
Work address (Please complete this section as clear as possible, information will be used for travel arrangements.)		Home address (Please complete this section as clear as possible, information will be used for travel arrangements.)			
_____ _____ _____		_____ _____ _____			
Fax No: (Country Code / Area Code / Number)	Telephone No:		Telephone No: Fax No:		
Update email address :		International Airport/City for departure :			
Name and address of person to be notified in case of emergency:					
Telephone No:		Relationship of this person to you:			

Languages :	READ			WRITE			SPEAK		
	Excellent	Good	Fair	Excellent	Good	Fair	Excellent	Good	Fair
Mother tongue :.....									
English									
Other.....									

English Proficiency Test (please attach) TOEFL Score IELTS Score
 (only a candidate for a degree course) Other (specify)

EDUCATION RECORD

Education Institution	City / Country	Years Attended		Degrees, Diplomas and Certificates	Special fields of study
		From	To		

Have you ever been trained in Thailand? If yes, what course, where and for how long?

For a candidate for a degree course, please give a list of relevant publications/researches (do not attach details)

B. EMPLOYMENT RECORD: It is important to give complete information. For each post you have occupied, give details of your duties and responsibilities.

Present or most recent post: Dates from _____ to _____	Description of your work, including your personal responsibilities
Title of your post:	
Name of organisation:	
Type of organisation:	
Official address:	Description of your work, including your personal responsibilities
Previous post: Dates from _____ to _____	
Title of your post:	
Name of organisation:	
Type of organisation:	Description of your work, including your personal responsibilities
Official address:	

C. EXPECTATIONS

Please describe the practical use you will make of this training/study on your return home in relation to the responsibilities you expect to assume and the conditions existing in your country in the field of your training. (give the attached paper, if necessary)

D. REFERENCES (only a candidate for a degree course please attaches the recommendation letters from two persons acquainted with your academic and professional experiences.)

I certify that my statements in answer to the foregoing questions are true, complete and correct to the best of my knowledge and belief.

If accepted for a training award, I undertake to :-

- (a) carry out such instructions and abide by such conditions as may be stipulated by both the nominating government and the host government in respect of this course of training;
- (b) follow the course of training, and abide by the rules of the University or other institutions or establishment in which I undertake to train;
- (c) refrain from engaging in political activities, or any form of employment for profit or gain;
- (d) submit any progress reports which may be prescribed;
- (e) return to my home country promptly upon the completion of my course of training.

I also fully understand that if I am granted a fellowship award, it may be subsequently withdrawn if I fail to make adequate progress or for other sufficient cause determined by the host Government.

Signature of applicant:

Printed name:

Date:

E. GOVERNMENT AUTHORISATION: To be completed by the nominating Government or the agency from whom the nomination has been invited.

I certify that, to the best of my knowledge,

- (a) all information supplied by the nominee is complete and correct;
- (b) the nominee has adequate knowledge and experience in related fields and has adequate English proficiency for the purpose of the fellowship in Thailand.

On return from the fellowship, the nominee will be employed in the following position:

Title of post

Duties and responsibilities.....

.....

.....
Signature of responsible Government official

Official stamp:

Title:

Organisation:

Official address:

.....

.....

Date:

MEDICAL REPORT

Name of Nominee	Age :	Sex :
Country.....		

Physical Examination (To be filled in by physician)

Height Cms. Weightkgs. Blood Pressure mm.Hg. Pulse/min.
 Vision Right Left Eyes With glasses / Without glasses

Check each item in appropriate column

Items	Normal	Abnormal	Additional Comments
General	<input type="radio"/>	<input type="radio"/>
Skin, Scalp	<input type="radio"/>	<input type="radio"/>
Lymph nodes	<input type="radio"/>	<input type="radio"/>
Eyes	<input type="radio"/>	<input type="radio"/>
Ears	<input type="radio"/>	<input type="radio"/>
Otoscopic Exam			
Nose	<input type="radio"/>	<input type="radio"/>
Pharynx & tonsils	<input type="radio"/>	<input type="radio"/>
Teeth	<input type="radio"/>	<input type="radio"/>
Thyroid gland	<input type="radio"/>	<input type="radio"/>
Lungs	<input type="radio"/>	<input type="radio"/>
Heart	<input type="radio"/>	<input type="radio"/>
Abdomen	<input type="radio"/>	<input type="radio"/>
Liver	<input type="radio"/>	<input type="radio"/>
Spleen	<input type="radio"/>	<input type="radio"/>
Hernia	<input type="radio"/>	<input type="radio"/>
External genitalia	<input type="radio"/>	<input type="radio"/>
Rectal exam	<input type="radio"/>	<input type="radio"/>
Vertebrae	<input type="radio"/>	<input type="radio"/>
Locomotor	<input type="radio"/>	<input type="radio"/>
Reflejes	<input type="radio"/>	<input type="radio"/>
Mental health status	<input type="radio"/>	<input type="radio"/>

LABORATORY EXAMINATIONS

Blood group Blood film for malaria Hb gm%

WBC Cells/cu.mm.

Differential PMN % Lymp % Mono % Eos %

Baso % Band % Blast %

Urinalysis : Colour Sp. Gr pH Sugar

Alb Blood Ketones Blie.....

Micro : WBC/HPF., RBC/HPF., Epethelial..... /HPF.

Casts/ HPD., Others

Stool examination for parasite & Ova

Chest X – Ray report

Urine pregnancy test

Is the nominee able physically and mentally to carry on intensive study away from home?

Is the nominee free from infectious diseases (such as tuberculosis, leprosy, syphilis and filariasis) and other conditions (such as psychosis and drug addiction) which could present risks for anyone during the fellowship period?

Does the nominee have any condition or defect which might require treatment during the fellowship period?

I certify that the applicant is medically fit to undertake a course in Thailand.

Full name and address of

Physician signatureM.D.

Examining physician (printed)

(.....)

Date.....

Telephone:

(printed)

e-mail:

INSTRUCTIONS

-2-

Qualifications

Applicants must satisfy the following criteria:

- Be in good health, both physically and mentally.
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- Have at least 3 years of working experience which is related to the applying course.
- Have a good command of written and spoken English.
- Be endorsed by the applicant's working agency or company and nominated by Bangladeshi Government.

Documents Required

- Three copies of TICA Application Forms (typed only), each affixed with photographs.
- Two letters of recommendation.
- Three copies of official transcripts of studies (mark sheets) in English.
- Three copies of degree certificates in English.
- Document showing your current TOEFL score (of 500 or higher) or other English language proficiency tests (e.g. IELTS).
- Health Certificate.
- Copy of applicant's passport (if possible).
- Proposal

Note.

1. *Incomplete Documents will not be considered.*
2. *Application Form has attached or download it from <http://www.tica.thaigov.net/main/en/services/1497>*

Financing Modality

- Full funding by the Royal Thai Government. The following costs will be borne for awardee;
- A round - trip air ticket.
- A settlement allowance and a monthly living allowance in Thai Baht.
- Accommodation for the duration of the awardee's stay in Thailand.
- Tuition (paid directly to the universities) and supplementary fees.
- Life and health insurance*.

**Health services relating to pregnancy, mental illness, dental treatment, glasses and any kind of sickness that happened before awardee arrive Thailand are not covered by the health insurance provided by the Royal Thai Government*