

MOST IMMEDIATE

No. 2(4)/2011-Admn-I
Government of Pakistan
Ministry of Commerce



Islamabad, the 2nd August, 2012

C I R C U L A R

Copy of Economic Affairs Division's O.M No. UN-IV/CW/T (12) 2012 dated 26-07-2012 alongwith a copy of self-explanatory letter received from Commonwealth Secretariat,U.K is forwarded for information/necessary action with the request that the suitable nominations duly approved/recommended by their respective senior officers may kindly be furnished to this Section latest by **03-08-2012** for onward submission to EAD, Islamabad.


(MARIA KAZI)
Section Officer (Admn-I)

GOVERNMENT OF PAKISTAN
MINISTRY OF ECONOMIC AFFAIRS & STATISTICS
ECONOMIC AFFAIRS DIVISION

No UN-IV/CW/T(12)2012

Islamabad, the July 26, 2012

OFFICE MEMORANDUM

Subject: - Commonwealth Regional Programme on Diplomatic Training at IDFR - 3-15 September, 2012, Malaysia.

The undersigned is directed to enclose herewith a copy of self explanatory letter received from Commonwealth Secretariat U.K. on the subject captioned above.

2. The subject training programme is aimed to enhance the participant's professional knowledge and skills in diplomacy so that they can play their role more effectively in defending and promoting their national interests in the international arena. Also, this course will serve as a forum for mid-career diplomatic from the Commonwealth to exchange ideas and experiences as well as to forge closer relationship and networking

3. The training award will be sponsored by the Commonwealth Fund for Technical Cooperation (CFTC) for the following:

- i) Return airfare from their respective capital city to Kuala Lumpur, on need basis as countries are encouraged to meet travel cost.
- ii) Accommodation
- iii) Daily subsistence allowance or per diem of RM85.00 per day for the duration of the course

4. It is requested to kindly furnish suitable nominations, duly approved by the competent authority alongwith following documents to this Division latest by 6-8-2012 for onward transmission, in case of approval, to Commonwealth Secretariat.

- | | |
|--------------------------------|--------|
| a) GID/1 Form (duly filled in) | 2 Sets |
| b) FTC Proforma | 1 Set |
| c) Medical Check-up Form | 2 Sets |


(Iftikhar Hussain Naqvi)
Deputy Secretary (UN)

DISTRIBUTION AS PER LIST ATTACHED

c.c.

1. Joint Secretary (Admn), Economic Affairs Division, for circulation within EAD.
2. Joint Secretary (Trg), Establishment Division, Islamabad.

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(Director General Admn.)
Government of Pakistan,
Islamabad.

Prime Minister's Secretariat (Public),
(Joint Secretary Admn.)
Government of Pakistan,
Islamabad.

Secretary,
Ministry of Foreign Affairs
Government of Pakistan,
Islamabad.

Secretary,
Ministry of Finance,
Government of Pakistan
Islamabad

✓ Secretary,
Ministry of Commerce,
Government of Pakistan,
Islamabad.

Secretary,
Ministry of Industries,
Government of Pakistan,
Islamabad.

Secretary,
Board of Investment,
Prime Minister's Secretariat (Public),
Government of Pakistan,
Islamabad.

Secretary,
Planning and Development Division,
Government of Pakistan,
Islamabad.

FOREIGN TRAINING COMMITTEE PROFORMA

Note: - Forms Not Filled Properly or Partially Filled forms will not be Considered.

PERSONAL INFORMATION						
Name	Gender	Date of Birth	Domicile	NIC Number (Photocopy must be attached)	Educational Qualifications	
PROFESSIONAL INFORMATION						
Ministry/Division/Department (Name and Address)	Present Designation / Grade (BPS)	Service Group	Date of Joining Govt. Service	Date of Present Posting	Regular or Contract Appointment	Present Professional Responsibilities
TRAINING INFORMATION						
List of all Foreign Trainings received previously (Name of Trainings)	Dates of Trainings Received	Relevance of proposed training with job responsibilities	Whether Nominated by the Ministry or Provincial Govt. or Department			

Signature of the Candidate _____



**COMMONWEALTH
REGIONAL PROGRAMME
ON DIPLOMATIC TRAINING
3 – 15 September 2012**

JOINTLY ORGANIZED BY:



**Institute of Diplomacy and Foreign Relations (IDFR)
Ministry of Foreign Affairs, Malaysia**



**Governance and Institutional Development Division (GIDD)
Commonwealth Secretariat (COMSEC)**

THROUGH:

Commonwealth Fund for Technical Cooperation (CFTC)



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COMMONWEALTH REGIONAL PROGRAMME ON DIPLOMATIC TRAINING

3 – 15 September 2012
KUALA LUMPUR, MALAYSIA

IDFR - COMSEC

PROGRAMME RATIONALE

Today's diplomats have to be knowledgeable and equipped with a multitude of skills to be able to play an effective role in the contemporary global environment characterized by globalization, rapid development in ICT and an ever changing geo-political landscape. The need for enhancing knowledge and skills is especially important to mid-career diplomats, who play a crucial role at Missions or at the Foreign Ministry, and are often at the threshold of being entrusted with heavier responsibilities as heads of missions.

This aim of this workshop is to enhance the participants' professional knowledge and skills in diplomacy so that they can play their role more effectively in defending and promoting their national interests in the international arena. In addition, this course serves as a forum for mid-career diplomats from the Commonwealth to exchange ideas and experience as well as to forge closer relationship and networking.

PROGRAMME OBJECTIVES

The objectives of the programme are:

- i) To expose participants to contemporary developments in diplomacy and international relations;
- ii) To enhance participants' knowledge and skills in handling work demands at Missions and to prepare them for higher responsibilities as heads of mission or deputy heads of mission;
- iii) To enhance participants' knowledge of contemporary global and regional issues;
- iv) To provide a forum for the exchange of ideas, experience and good practices.
- v) To support an institutional network of Foreign Service Institutes and Academies within Asia region and beyond

PROGRAMME CONTENT

The areas that will be given special focus in this workshop are as follows:

- i) Contemporary International Issues
 - Globalisation
 - Overview of the current global economic, political, social and cultural situation
- ii) Regional Issues
 - ASEAN and SAARC
 - Commonwealth
- iii) Diplomacy
 - Recent Development in Diplomacy
 - Globalised Diplomacy
 - Cultural, Sports and Science Diplomacy
 - Cross-Cultural Awareness
 - Trade Negotiations
 - Environmental Diplomacy
 - Knowledge Management
 - Crisis Management
 - Leadership & Organizational Management
- iv) 3-day attachment at the Ministry of Foreign Affairs Malaysia

TRAINING METHODOLOGY

The programme is highly participatory and interactive. Learning will be through study visits, lectures, group discussions, panel discussions and simulation exercises.

RESOURCE PERSONS

Former ambassadors, senior government servants and internationally recognized training consultants from the private sector will be the resource persons for this workshop.

PARTICIPANT PROFILE

This course is open to senior officials from the Foreign, Economic, Trade and Commerce Ministries in the Commonwealth. Officials from the national foreign service training institutes/academies are particularly welcome. **The participants should be within the 35-45 age bracket**, fluent in English and have served in their respective ministries/training institutions for a minimum of 10 years.

TERMS OF AWARD

The participants would be provided with financial support by the Commonwealth Fund for Technical Assistance (CFTC) for the following:

- Return airfare from their respective capital city to Kuala Lumpur, **on need basis as countries are encouraged to meet travel cost**
- Accommodation
- Daily subsistence allowance or *per diem* of RM85.00 per day for the duration of the course

Participants or his/her nominating government /agency will be expected to bear the following costs:

- Expenses incidental to travel abroad such as visas, passport, medical/travel insurance cover, vaccinations, airport fees and excess luggage
- Compensation in the event of death, disability or illness

Participants are expected to submit a typed written essay of not less than 350 words on the foreign policy, national and regional issues of their respective country along with their application form.

PROGRAMME DURATION

The duration of the programme is 13 days. The tentative dates are from **3 – 15 September 2012**.

ACCOMODATION

Accommodation will be provided at one of the hotels in Kuala Lumpur.

APPLICATIONS /NOMINATIONS AND ENQUIRIES

Applicants should be nominated by the Point of Contact (POC) of the Governance & Institutional Development Division (GIDD) of the Commonwealth Secretariat in the applicant's country. The application should be made on the GID/1 nomination form found in this brochure and sent to the Commonwealth Secretariat for its consideration at the following address:

Director
Governance & Institutional Development Division (GIDD)
Commonwealth Secretariat
Marlborough House, Pall Mall
London SW1Y 5HX
United Kingdom
Attn.: Mr. M. Jasimuddin, Adviser (Asia)

Tel: +44(0) 207 747 6343
Fax: +44(0) 207 747 6335 / 6540
Email: m.jasimuddin@commonwealth.int

A copy of the GID/1 nomination form should be sent to:

Director General
Institute of Diplomacy and Foreign Relations (IDFR)
Ministry of Foreign Affairs, Malaysia
Jalan Wisma Putra
50460 Kuala Lumpur
Malaysia
(Attn.: Ms. Romaiza Ab Rahman)

Tel: 603 2149 1014
Fax: 603 2145 7015
Email: romaiza@idfr.gov.my

All application forms should reach the Commonwealth Secretariat and IDFR at least 3 weeks before the start of the course.

The closing date for the nomination: 10 August 2012

It is important to provide full passport details, date and place of issue and expiry (for insurance purposes) and contact details – email, telephone and mobile numbers.

Successful candidates will be notified. Candidates who do not receive a **Signed Award Letter** from **GIDD, Commonwealth Secretariat** within **two weeks** before the course begins can consider themselves as not successful in their application.

Any clarification on this matter should be sought at the above address.



Institute of Diplomacy and Foreign Relations (IDFR)
Ministry of Foreign Affairs, Malaysia

The Institute of Diplomacy and Foreign Relations Malaysia (IDFR) was established in 1991 to organize training programmes in diplomacy and international relations for the Ministry of Foreign Affairs and other government agencies in Malaysia. Since its establishment, IDFR has also been involved in conducting international courses, especially for participants from other developing countries, under the Malaysian Technical Cooperation Programme (MTCP). In addition, the Institute currently also conducts international courses that are fully or partially sponsored by third parties such as the ASEAN Secretariat, the Colombo Plan Secretariat, and the Commonwealth Secretariat.

Director General
Institute of Diplomacy and Foreign Relations (IDFR)
Ministry of Foreign Affairs, Malaysia
Jalan Wisma Putra
50460 Kuala Lumpur
Malaysia

Contact Person:

Name: Ms. Romaiza Ab Rahman
Position: Deputy Director of Training
Tel: 603 2149 1014
Fax: 603 2145 7015
Email: romaiza@idfr.gov.my
Website: www.idfr.gov.my

FORM GID/1

The Commonwealth Secretariat
GOVERNANCE & INSTITUTIONAL DEVELOPMENT DIVISION (GIDD)

NOMINATION

by the Government of _____

for a training course/study visit/training attachment/workshop* (*delete as applicable*)

for _____ (*name*)

in _____ (*subject field*)

due to start _____ (*date if known*) in _____ (*country*).

This form (GID/1) should be completed for each nominee with a passport sized photo of the nominee.

Part I is to be completed by the nominee.

Part II is to be completed by the nominee's departmental head.

The form should then be endorsed below by an officer in the Government Ministry or Department designated as the Point of Contact (PoC) for the Governance & Institutional Development Division of the Commonwealth Secretariat, and posted or faxed to:

The Director
Governance & Institutional Development Division
The Commonwealth Secretariat
Marlborough House
Pall Mall
London SW1Y 5HX

All correspondence with GIDD about this application will be through the PoC.

For Completion by the Government Designated Point of Contact:

I certify that this nomination has the endorsement of the Government and that to the best of my knowledge, the details given in the application form are correct. *(If you are nominating more than one person for this programme please indicate an order of priority.)*

Signed: _____ Stamp of Department

Name: _____

Position: _____

Department/Ministry: _____

Date: _____

FORM GID/1 Part I

The Commonwealth Secretariat
GOVERNANCE & INSTITUTIONAL DEVELOPMENT DIVISION (GIDD)

PERSONAL DETAILS To be completed by the nominee.
*Please use BLOCK CAPITALS or typewriter *Circle as appropriate*

1. Surname or family name: _____

2. Forenames or personal names: _____ *Please attach a photograph*

3. Title: Mr/Mrs/Miss/Ms/Dr/Other*

4. Male/Female*

5. Date of Birth: _____ Place of Birth: _____ *here*

6. Nationality (if different from passport): _____

7. Home address:

Phone: _____ Fax/E-mail: _____

8. Work Address:

Phone: _____ Fax: _____

E-mail/Telex: _____

9. Passport Details: Nationality: _____ Number: _____

Date/Place issued: _____ Type: _____ Expires: _____

10. Name & address of person to be contacted in an emergency (including telephone number).

Relationship of this person to you: _____

11. Have you ever travelled abroad before? If YES, give details.

12. Give details of any disability, or any medical condition which may require treatment during your training, or any dietary restrictions.

13. Please make an assessment of your ability in English (Circle as Appropriate)

Reading: Excellent/Good/Average/Poor
Writing: Excellent/Good/Average/Poor
Speaking: Excellent/Good/Average/Poor

14. Education Record

If possible attach copies (NOT the originals) of your academic transcripts, etc. Include any professional attachments, short courses or workshops which you have attended. Indicate any courses being taken, expected date of completion, and the qualification to be obtained.

<u>Institution</u>	<u>Location</u>	<u>Dates Attended</u>		<u>Qualifications obtained & subjects studied</u>
		<u>From</u>	<u>To</u>	

15. Please give details of any other professional qualifications not mentioned above.

16. **Employment Record**

Please list current occupation first and then your 2 previous posts.

Current Employer
(and nature of business):

Job Title:

Dates:

Duties of the Post:

Previous Employer
(and nature of business):

Job Title:

Dates:

Duties of the Post:

Previous Employer
(and nature of business):

Job Title:

Dates:

Duties of the Post:

17. Personal Statement

Please describe briefly those aspects of your present work which relate to the training requested.
How will the training help?
Are there other skills which the training should cover?

18. Undertaking

I _____ (*name in CAPITALS*)
of _____ (*Country*) certify that the statements
made by me in Part I of this form are true, complete, and correct to the best of my
belief.

I also fully understand that if I am granted an award it may subsequently be
withdrawn if I fail to make adequate progress, or for other sufficient cause determined
by GIDD, my own, or the host Government I undertake to return to my country after
completion of the training programme.

Except as mentioned in 12 above, I confirm that I am in good health.

Signature: _____ Date: _____

FORM GID/1 Part II

The Commonwealth Secretariat
GOVERNANCE & INSTITUTIONAL DEVELOPMENT DIVISION (GIDD)

TRAINING REQUIREMENTS

To be completed by the employer

1. Name of Nominee _____

If others are nominated for this training please indicate their priority relative to the
nominee.

<u>Higher Priority</u>	<u>Equal Priority</u>	<u>Lower Priority</u>
1.	1.	1.
2.	2.	2.
3.	3.	3.

2. Training Needs

Please indicate the subject, nature, and level of the training requested.

Why is the training required? (Please indicate relevance to national development.)

Describe any particular problems which the training is intended to help solve.

(Continue on a separate sheet if necessary)

3. Content & Objectives of the Training

Please specify in as much detail as possible:-

- why the nominee was selected.

- what post he/she will fill on return.

- the skills you wish him/her to acquire.

(Continue on a separate sheet if necessary)

4. Other Sources of Assistance or Sharing of Costs

Are you requesting assistance from elsewhere? Give details.

Yes/No*

If partial assistance were offered by GIDD, is your Government or any other source prepared to meet any part of the cost?

Yes/No*

Please give details

Complete either
or
and

Section A for formal courses,
Section B – study visits for training attachments
the section on Costs.

A For formal courses

5. If you have a particular courses in mind, please give:-

- exact course title

- institution & country

- course start dates & duration
(if known)

Has an application been made by or on behalf of the nominee(s)? (If so, please give details and attach copies of any response, other, or rejection.

Yes/No

6. If you do not know of a particular course, please give (on a separate sheet) as much information as possible to assist in identifying a suitable programme; eg specific subject areas, specializations, and possible countries or institutions.

B Study Visits & Attachments

7. If you know of any suitable places for the visit or attachment, please give details, including the address of the host organisation, dates/duration, details of the required training, and copies of any relevant correspondence.
8. If no approach has been made, please give details of the visits/experiences to which the nominee(s) should be exposed, with details of their present and future work. Include details of industrial processes, machinery or equipment used.

(Continue on separate sheet)

9. Anticipated Cost of Training

Please give anticipated costs for the training as shown below, indicating whether these are known, estimated, or unknown. (Please attach explanatory documents where appropriate.) Please note that the absence of this information may delay Processing.

Travel

Fees

Subsistence Allowance

Other costs (*specify*)

10. Please comment, if appropriate, on any answers given by the nominee in Part 1.

11. I confirm that I believe all the statements in this form to be correct.

Signed: _____ Position: _____

Name: _____ Date: _____ Organization: _____

Appendix II

MEDICAL CHECK UP FORM

MEDICAL HISTORY AND EXAMINATION FOR THE TRAINING AWARD (TO BE COMPLETED BY NOMINEE)

Name of Nominee (as in International Passport)		
Date of Birth	Gender Male / Female	Nationality

Name of Training Course:

IMPORTANT:

Before you complete the Medical History, you are hereby notified that:

A medical condition resulting from an undisclosed pre-existing condition may not be financially compensated for COMSEC and INFRA and may result in termination of your training programme.

I understand and accept the terms to notice. YES / NO

NOMINEE WILL CHECK "YES" OR "NO" AND EXPLAIN WHERE NECESSARY

	YES	NO		EXPLANATION
a			Have you had any significant or serious illness or injury? (if hospitalized, give place & dates)	
b			Have you had any operations or advised by physician to have an operation? (Give place & date)	
c			Do you currently use any drugs for treatment of a medical condition? (Give name & dose)	
d			Have you ever been a patient in a mental hospital or sanatorium or treated by a psychiatrist? (Give place & date)	

NOMINEE WILL INDICATE "YES" OR "NO" TO EACH ITEM

Do you now have you ever had the conditions listed below? (Please tick)

	YES	NO		EXPLANATION
a			Asthma, emphysema, or other lung conditions	

b			Tuberculosis or live with anyone who has tuberculosis
c			High blood pressure, heart disease
d			Stomach, liver(hepatitis), gall bladder disease
e			Kidney or bladder disease, stone or blood in urine
f			Diabetes (sugar in urine)
g			Depression, excess worry, attempted suicide, or other psychological symptoms
h			Acquired Immune Deficiency Syndrome (AIDS)
i			Tumor, abnormal growth, cyst or cancer
j			Bleeding disorder, blood disease (sickle cell anemia)

I CERTIFY THAT I HAVE READ THE ABOVE INSTRUCTIONS AND ANSWERED ALL QUESTIONS TRULY AND COMPLETELY TO THE BEST OF MY KNOWLEDGE:

NAME:	DATE:	SIGNATURE:

MEDICAL REPORT (TO BE COMPLETED BY AN AUTHORIZED PHYSICIAN)

Name of Applicant:			
Age:	Gender:	Height:	Weight:
Blood group:		Blood pressure:	
Is the person examined at present in good health?			
Is the person examined physically and mentally able to carry out intensive training away from home?			
Is the person free of infectious disease (AIDS, tuberculosis, trachoma, skin disease, SARS etc)?			
Does the person examined have any condition of defect (including teeth) which might require treatment during the course?			
List any abnormalities indicated in the chest X-Ray.			
Pregnancy Test result (for women only):			

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

Name of Physician:

Address of Clinic/Hospitals:

Telephone No.: _____ No./Fax: _____

Email: _____

Signature of Physician: _____

Seal/Stamp of Clinic/Hospital:

