

**Competency Mapping of Resources  
Management Development Training Department  
Eastern Province**

1. Personal Information														
1.1 NIC														
1.2 Name with initials														
1.3 .Names denoted by initials														
1.4. Contact details (Official )														
1.4.1 Address														
1.4.2 Telephone No														
1.4.3 e-mail														
1.5 Contact details (Private )														
1.5.1 Address														
1.5.2 Telephone No														
1.5.3 e-mail														
1.6 Gender (Tick (√) as appropriate)	Male							Female						
1.7 Date of birth	D	D	M	M	Y	Y	Y	Y						
1.8 Civil status (Tick (√) as appropriate)								Single		Married				
2. Details of Service														
2.1 Name of Institution														
2.2 Date of first appointment to present service	D	D	M	M	Y	Y	Y	Y						
2.3 Present Service									2.3.1 Class					
3.0 Qualifications														
<b>3.1 Educational Qualifications (Please attached True copy of Certificates, Certified by HOD)</b>														
No	Qualification	Main Subject	Year of award				University/Institution							
<b>3.2 Professional Qualifications (Please attached True copy of Certificates, Certified by HOD)</b>														
No		Main Subject	Year of award				University/Institution							
<b>3.3 Training of Trainers Qualifications</b>														
No	TOT Subject		Year	Duration	Institution									
<b>3.4 Experiences as a Trainer</b>														
No	Subject Areas		Duration of the training		Number of training									



