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Government of NCT of Delhi
Department of Information Technology
Delhi e-Governance Society
9th Level, B- Wing, Delhi Secretariat, I.P Estate, New Delhi.

F.No.: F6(363)/IT/2014 / 4381-4555

Date: 16-6-14

CIRCULAR

Department of Information Technology, GNCTD is organizing a **04 days residential training** program on "**Government Process re-engineering**" in association with National Institute for Smart Government (NISG). The details of the training program are as:-

Date: **26th July, 2014 (afternoon) to 29th July, 2014 (forenoon)**

Venue: **Hyderabad**

Nominations are invited from **Senior and Middle level officers**. Delhi e-Governance Society, Department of IT, GNCTD will bear the expenditure related to the training (including boarding/lodging). Travel expenses would be borne by the concerned nominating department(s).

It is requested to send the nominations in the prescribed format (attached as Annexure-I) to attend the said training programme latest by **5th July, 2014** at the above address. It is also requested to forward scanned copy of the nomination form to email id: **puja.b@semt.gov.in**.

For any other queries related to this programme, you may contact **Ms. Puja Barthakur, Consultant (SeMT) at Mobile No: 9560718832.**



(Ajay Chagti)

Additional Secretary (IT) & MS (DeGS)

To

1. All Principal Secretaries/Secretaries/HODs/Heads of Autonomous Bodies/Agencies

Copy for information to:-

1. Principal Secretary to Hon'ble Chief Minister
2. Secretaries to Hon'ble Ministers
3. OSD to Chief Secretary

Copy for information to:-

1. Programmer (IT) for uploading the Circular on the website of IT Dept, GNCTD

**Nomination form for "Government Process re-engineering" training programme
scheduled in July, 2014**

1.) Details of Nominee:-

a.) Individual Details	
Name of the officer	
Designation of Officer	
Department Name	
Office Location	
Email id:	
Mobile No. & other contact details	
b.) Work Function Details	
Present Job Assignment including involvement in IT/e-Governance/Project Management initiatives, if any	

Signature of the H.O.D nominating the participant

(Name and Designation)

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**Signature of the H.O.D nominating the participant
(Name and Designation)**