

Department of State Accounts

Government Payroll System (GPS) Training Registration Form

Name of Applicant :.....
Designation :.....
National Identity Card No :.....
Name of the Organization :.....
Official Address :.....
.....
.....

Contact Details

Office :..... Fax :.....
Mobile :..... WhatsApp :.....
E-mail :.....

Did you get training on Payroll programme (GPS) : Yes No

If yes, specify the training details

Number of Days :.....
Place :.....
Other :.....

I hereby apply to follow the above training programme

Date :.....

Signature of Applicant

Director General,
Department of State Accounts.

Recommended to follow GPS training course for above named officer.

Date :.....

Signature & Official seal of Head of Finance

** For further details, Contact 011-2034516 or 011-2484782 **