

# Administrative Training Institute

Govt. of West Bengal

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## NOMINATION FORM

Name of the Training Programme

For Office use only

### NOMINEES INFORMATION

Name:

Designation:

Institute/  
Organisation:

Scale of Pay:

Date of Birth:  -  -  Sex:  M /  F

Address:   
for   
Communication  Pin:

E-mail:

Phone:

Fax:

Whether have you  
attended any training  
programme earlier at  
ATI WB, pl. indicate:

