

**INDIAN COUNCIL OF AGRICULTURAL RESEARCH
KRISHI BHAVAN: NEW DELHI-1**

F.No.ADMN/7/ 87 /2017-WS

Dated the 10 Aug., 2017.

OFFICE MEMORANDUM

Subject: One day Workshop on Right to Information for Appellate Authorities to be held on 23.11.2017 at ISTM, New Delhi.

The Institute of Secretariat Training and Management (ISTM), New Delhi has invited nominations for **One day Workshop on Right to Information for Appellate Authorities to be held on 23.11.2017 at ISTM, New Delhi**. The aim of the workshop is to provide to the First Appellate Authorities a platform to discuss various nuances of considering an appeal against the decision of the Public Information Officers. Details of the Workshop are as under:-

Objectives: By the end of the workshop, the participants will be able to:-

- Admit a fully referenced appeal;
- Scan CPIOs action on original request for information; and
- Respond through a speaking order.

Course Contents:

- Details of appeal by a requester or a third party
- Grounds for appeal
- Consideration of appeal.

Eligibility Conditions: Officers senior in rank to the PIOs in various public authorities, having the responsibility to function as appellate authority under RTI Act, 2005.

The eligible and interested officers, who are functioning as Appellate Authority under the RTI Act may send their nomination in the enclosed nomination form through proper channel latest by **18.09.2017** for onward transmission to ISTM, New Delhi.

The Officers who have already attended this training course need not apply. The applicants will not be allowed to withdraw their nominations after acceptance by ISTM, New Delhi.

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(Suparna Dasgupta)
Under Secretary(WS)
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Distribution:

1. All Appellate Authorities under RTI Act working at ICAR Hqrs through web-site.
2. All the Appellate Authorities under RTI Act of ICAR Institutes/NRCs / PDs/Bureaux through web-site.
3. DKMA, KAB for uploading the same on ICAR Web-site.
4. Guard File

NOMINATION FORM

Annexure-II

Please read the instructions provided on Page No.-3 before filling up the Nomination form: -

Course Title: _____ Course Code: _____

Date: From _____ to _____

1.	Name in English:	First*	Middle	Last*
	Name in Hindi:			
2.	Father's / Spouse's Name:			
3.	Service / Cadre & Grade/Rank*:		4.	Date of joining / last promotion:
5.	Pay Band:		6.	Grade Pay / Scale of Pay:
7.	Gender:		8.	Date of Birth*:
9.	Organisation Name*:		10.	Organisation Type*:
11.	Organisation Street Address*:		12.	Organisation City*:
13.	Organisation State*:		14.	Pin Code*:
15.	Organisation Email*:		16.	Organisation Phone*:
17.	Residence Street Address*:		18.	Residence City*:
19.	Residence State:		20.	Pin Code*:
21.	Personal Email*:		22.	Personal Phone*:
23.	Category*: (SC/ST/OBC/GEN)		24.	Emergency Contact Details*:
25.	Educational Qualification*:			
26.	Service to which belongs*:			

27. Brief Service Particulars:

S. No.	Post Name	From	To	Scale of Pay	Nature of Duty

28.	Whether fulfils eligibility conditions* (☑ -applicable option):	Yes <input type="checkbox"/> / No <input type="checkbox"/>
29.	Whether Hostel Accommodation is required* (☑ -applicable option):	Yes <input type="checkbox"/> / No <input type="checkbox"/>

30.	How the training is likely to benefit the nominee as well as the organisation (In 2 lines)*:	
31.	Details of earlier applications for the same course*:	
32.	Previous courses attended at ISTM (with dates in bracket)*:	

I certify that the above information is correct:

Signature of the Nominee
(With Date & Seal)

TO BE FILLED IN BY THE SPONSORING AUTHORITY

It is certified that the particulars given above are correct. The officer will be relieved for training, if selected and in no case will be withdrawn in between from the course. The prescribed Capitation Fee and other charges as applicable will be paid to ISTM for this course.

Details of the Sponsoring Authority (All fields are mandatory)*:

Name:	
Designation:	
Complete Postal Address (with Pin code):	
Telephone Number (with code):	
Fax Number (with code):	
Signature with Office seal:	