PP



**NOMINATION FORM (MMC-A)**

*MIDDLE MANAGERS CLASS*

*(To be filled-out by the Head of Agency)*

**CONFIDENTIAL**

I, *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,* \_\_\_\_\_\_\_\_\_\_\_\_\_\_ of the *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,* willfully nominate the *(name) (position) (agency)*

following officer/s for admission to the Public Management Development Program, **Middle Managers Class** **Batch \_\_\_\_\_\_** on the basis of his/her/their good character and outstanding performance:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Title (Mr./Ms.)** | **Name** | **Current position** | **SG** | **Division/ Office / Region** | **Contact Number** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

I understand that the above candidates meet the qualifications of PMDP, are physically and mentally fit to undergo training, and will be granted the full scholarship provided that they pass the admission process of the Program.

As our commitment, the agency will allow them to take the PMDP training once they are confirmed by the NGCESDP Steering Committee. Further, I certify that the accepted scholar/s will be relieved from their official duties and shall be considered on study leave for the duration of the six-month intensive training for them to be able to focus in the Program.

Should there be any changes or deferment, we will notify the PMDP Secretariat through a letter of notice.

Our Human Resources Manager/Officer, (Mr./Ms.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ can be reached through the following contact nos. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to coordinate submission of application and completion of document requirements.



Thank you for this opportunity.



\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Printed Name and Signature**

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_