

**GOVERNMENT OF TELANGANA  
DEPARTMENT OF TECHNICAL EDUCATION**

Cir. Memo. No. T1/11195/ 2015

Dt:-11-04-2017

Sub:- TECHNICAL EDUCATION – The Training Programme on  
**“Website Development Using PHP”** Scheduled from  
**15.05.2017 to 20.05.2017 (6 Days)** Nominations called  
for Dr. MCRHRDI, Hyderabad – Reg.

Ref:- Lr. No. T2/292/CIT/SR(State)/2017, Dt: 25-03-2017, received  
from Dr. MCRHRDI, Hyderabad.

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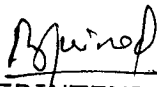
In this connection, it is submitted that the Secretary SBTET, RJD Hyderabad and all the Principals of Govt. Polytechnics of Telangana state are hereby informed that Dr. MCRHRDI, Hyderabad is conducting Training Programme on **“Website Development Using PHP”** Scheduled from **15.05.2017 to 20.05.2017**. They have requested to circulate the same among the Gazetted officers and Staff members send nominations for the training programme, of those who are interested and have not undergone this programme earlier in the proforma enclosed office to take further action in the matter. They may send the nomination to [adtrg.ts@gmail.com](mailto:adtrg.ts@gmail.com) on or before 20.04.2017 order to submit for Dr. MCRHRDI, Hyderabad.

Encl: As above

Sd/- A. VANI PRASAD  
COMMISSIONER

To  
The Principals of All Govt. Polytechnics under control  
of Department of Technical Education.  
Copy to Secretary, SBTET, TS, Hyderabad.  
Copy to RJD of Technical Education, Hyderabad.  
Copy to Stock File / Spare.

//F.B.O//

  
SUPERINTENDENT  
11/04/2017



Dr. MCR Human Resource Development Institute of Telangana

(<http://www.mcrhrdi.gov.in>)

**NOMINATION FORM**

1. Programme Name:

*(Mention the Programme for which Nomination is being sent)*

2. Programme Date From: To:

3. Name of the Candidate:  
(Capital letters)

4. Designation:

5. Department:

6. Date of Birth:

7. SC/ST/OBC/Others:

8. Basic Pay/Scale of Pay:

9. Academic Qualifications & Professional Qualifications:

10. No. of Years of Service in Govt.,

11. Experience Profile:

12. Address for Communication (Office):

Fax(O):

Phone No.(O)

(Mobile No.)

(Email-ID)

Signature of the Candidate

**TO BE FILLED IN BY THE NOMINATING AUTHORITY TO RECEIVE CONFIRMATIONS (Mandatory)**

- 1) Name :
- 2) Address:
- 3) Office Phone No:
- 4) Fax No:
- 5) Email-ID:

Certified that:

- a. The Particulars given above are correct
- b. Due care has been taken of the training needs of the office nominated with reference to his present/future duties viz-a-viz the contents of the course
- c. The officer, if selected, will be relieved on full-time basis for attending the programme

Signature of the Nominating Authority with Seal

**Dr. MCR HRD Institute of Telangana, Road No.25, Jubilee Hills, Hyderabad**