

**MHRD**

**Department of Higher Education**

**Format for Nomination of Faculty to Three Weeks Leadership  
Development Programme with One Week Foreign Training  
Component for the year 2018-19**

Name and Designation			
Official Address & other contact details			
No. of years of Teaching experience as Professor			
Comment on Leadership / Governance Qualities			
Comment on Integrity			
Details of Training Programmes attended, if any	Name of the organization	Dates	Themes
Any other information			
Date & Place:	Signature & Seal of Head of Institutions		