

KUWAIT INSTITUTE FOR SCIENTIFIC RESEARCH HUMAN RESOURCES DIVISION MANPOWER DEVELOPMENT DEPARTMENT

AGREEMENT FORM

COURSE TITLE:			
DATE:	(days/v	week)	Time:
NAME (Correct Spelling):	Dr./Eng./Mr./Ms		
ID:			
JOB TITLE:			
CATEGORY:			
CENTER/PROGRAM:			
TELEPHONE & EXTENSION:			
E-MAIL:			
HIGHEST EDUCATIONAL DEGREE OBTAINED:			
NATIONALITY:			
A. I AGREE TO ATTEND THE ABOVE MENTIONED COURSE (Please tick-mark)			
(If a participant discontinues a course during the course duration, he/she may not be considered for other training programs (i.e., in-house, local, abroad, OJT, etc.) during that fiscal year			
DATE:			
B. I DISAGREE TO AT (Please provide the justificat			IONED COURSE (Please tick-mark)
 DATE:			
Nominee:		Program	m Manager:
(Signatu	ire)		(Signature)
Research Co-Ordinator:	(Signature)	Opera	ration Division:(Signature)
* This agreement form * Once the agreement f course without any fu MDD will inform the	must reach Manpowe form has been comple- in ther notification from participant	er Development De ted and sent to MI n MDD. In case th	ndance to obtain the course certificate epartment (MDD) on or before the set deadline DD, the participant is supposed to attend the he course is cancelled or anything unforeseen happens,

* In compliance with MDD rules and regulations, nominees who have signed an agreement form/registered for a training course and fails to show up will be SUSPENDED from attending ALL in-house, local, abroad courses.