
Q: List your responsibilities at work?

1. _____
2. _____
3. _____
4. _____
5. _____

Q: Have you ever attended any workshop on 'Quality & Accountability' before? If yes, then please give details?

Q: List your expectations from this workshop?

1. _____
2. _____
3. _____

Q: List how would you benefit from this workshop?

1. _____
2. _____
3. _____

NOTE :

- Kindly send your application form via email at shaprograms@cwspa.org.pk by August 01, 2012
- Organization is willing to pay the Registration and Travel expenses. Yes No
- **Incomplete Applications will not be entertained.**

SIGNATURE OF EMPLOYER

DATE

SIGNATURE OF APPLICANT

DATE
