

MINISTRY OF PUBLIC ADMINISTRATION

NATIONAL HUMAN RESOURCE DEVELOPMENT NEEDS FORM

NAME OF MINISTRY/				
DEPARTMENT				
ADDRESS				
FORM COMPLETED BY	FIRST NAME:		LAST NA	ME:
JOB TITLE/DESIGNATION				
DIVISION				
DATE COMPLETED				
	TELEPHONE CONTACT			Email:
CONTACT INFORMATION	Work & Ext.	Mobile(optional	I)	
A. Based on your Ministry's/Department's current staffing needs, please identify the position/s and				

A. Based on your Ministry's/Department's current staffing needs, please identify the **position/s** and **areas of study** in which you are experiencing difficulty to recruit persons with the required training or skills.

POSITION/JOB TITLE	NO. OF POSITIONS	DIVISION	REQUIRED ACADEMIC QUALIFICATIONS	HOW CRITICAL ARE THESE POSITIONS? (High/Medium/ Low)

B. Please list the projects under-taken by Consultants during the last five (5) years within your Ministry/Department. What were the specific skills and competencies required?

PROJECT/S	NO. OF CONSULTANTS RECRUITED	DIVISION	ACADEMIC QUALIFICATIONS OF CONSULTANTS	KEY COMPETENCY/SKILLS REQUIRED	DURATION OF ASSIGNMENT



The Government of the Republic of Trinidad and Tobago

MINISTRY OF PUBLIC ADMINISTRATION

C. Based on your Ministry's/Department's strategic plan, identify the key projects that will be initiated or implemented over the next three (3) to five (5) year period. Please identify the skills and academic qualifications that will be required.

PROJECTS/AREAS	NO. OF POSITIONS	ACADEMIC QUALIFICATIONS	KEY COMPETENCY/SKILLS REQUIRED	DIVISION	HOW CRITICAL ARE THESE PROJECT (H/M/L)

Additional Commo	ents/Suggestions:	
CICNATUDE		
SIGNATURE:		
DATE:		

THANK YOU FOR YOUR FEEDBACK