|  |
| --- |
| **THREE YEARS STAFF TRAINING PROJECTIONS 2014-2017** |
|  |  |  |  |  |  |  |  |
| **S/No.** | **Name** | **P/No.** | **Date of 1st Appointment** | **Highest Academic Qualifications** | **Courses attended since -------** | **Training Needs** | **Remarks** |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |