



**Lr. No.16-2/2015-Trg**

**19 Feb 2016**

**To  
Heads of All BSNL Units**

**SUB: BSNL Faculty Support Team – Calling options reg.**

In past few years, BSNL has evolved as the lead training provider in telecom domain within India. Through Asia Pacific Telecommunity (APT) and Commonwealth Telecom Organization (CTO), BSNL is delivering telecom training for foreign nationals also. Many of BSNL experts have been delivering training courses in various countries for the past few years. In recent past, ALTTC Ghaziabad has been identified as the Center of Excellence under International Telecom Union (ITU) and it is going to complete two training courses successfully in this financial year 2015-16. BSNL as well, is getting worthy opportunities to impart telecom training from various State Govts/Private entities. With the ensuing responsibility of training the VLEs (Village Level Entrepreneurs) for NOFN network, Skill Development, taking over one semester of an Engineering college & train the entire batch in our training centers, etc., (most of them being country-wide initiatives), the Training Faculty in BSNL need to be adequately enriched and strengthened.

In the present scenario, there is utmost need of valuable support from all talented experts in BSNL. Therefore, it is felt essential to constitute a panel consisting of highly qualified (viz. PhD/MBA/M.Tech/Law/etc. or equivalent) BSNL officials/executives both **serving as well as retired** officials/executives of BSNL having expertise in any of these fields. This Team will extend support to the training faculty in respective training centers as and when needed.

In order to actualize this initiative different activities have been assigned to various BSNL units as below:

**I. BRBRAITT Jabalpur**

1. To issue suitable instructions to CTMS portal team to ensure the following activities at the earliest:
  - a. To provide feature for online registration in CTMS training portal (<http://training.bsnl.co.in>) so as to enable online enrollment. Sample format for online enrolment is enclosed at **Annexure**.
  - b. To code various validation checks at crucial mandatory fields like HRMS No., DoB, Circle, etc to avert any junk entries.
  - c. To develop various reports to monitor progress of online registrations at various levels.
2. To convey CTMS portal readiness for online enrollment to all BSNL units latest by **15.03.2016**

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## II. All APEX TTCs & RTTCs:

1. To arrange provision in their respective training center web sites for wide publicity of this initiative once the provision is ready in CTMS portal.
2. To monitor online enrollments and follow up with the circles in concerned zone for better results
3. To examine the online registrations for respective Training Center so as to utilize their services as and when required

All interested candidates must enroll themselves through the aforesaid CTMS Portal from **16-03-2016 to 31-03-2016**. However retired employees may be given a scope to apply through plain paper to the respective Principals of Training Centers.

All are requested to ensure due publicity among the executives/officials towards developing an expert BSNL Faculty Support Team.

**Encl:** As above

  
(D. Chakrabarti)  
General Manager (Training)

Copy To:

1. DIR (HR), BSNL Board for kind information please
2. CGMs of ALTTC/BRBRAITT/NATFM & Principals of RTTCs for information & n/a

|                                                                                       |                                                                                                                                                                                                                            |  |                |
|---------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------|
| Name*:                                                                                |                                                                                                                                                                                                                            |  |                |
| Designation*:                                                                         |                                                                                                                                                                                                                            |  |                |
| Staff No:                                                                             |                                                                                                                                                                                                                            |  |                |
| HRM No*:                                                                              |                                                                                                                                                                                                                            |  |                |
| Proforma Date:                                                                        | 2016-02-17                                                                                                                                                                                                                 |  |                |
| Date of Birth*:                                                                       | January                                                                                                                                                                                                                    |  | dd/mm/yyyy     |
| Qualification 1*:                                                                     |                                                                                                                                                                                                                            |  |                |
| Qualification 2:                                                                      |                                                                                                                                                                                                                            |  |                |
| Qualification 3:                                                                      |                                                                                                                                                                                                                            |  |                |
| Whether serving/retired BSNL<br>official/executive*:                                  |                                                                                                                                                                                                                            |  |                |
| Office Address*:<br>(Address of Residence in case of retired<br>officials/executives) |                                                                                                                                                                                                                            |  |                |
| Circle*:                                                                              |                                                                                                                                                                                                                            |  |                |
| Contact details:                                                                      |                                                                                                                                                                                                                            |  |                |
| Landline(with STD Code)*:                                                             |                                                                                                                                                                                                                            |  |                |
| Mobile*:                                                                              |                                                                                                                                                                                                                            |  |                |
| E-mail*:                                                                              |                                                                                                                                                                                                                            |  |                |
| Passport details(if available):                                                       |                                                                                                                                                                                                                            |  |                |
| Passport No:                                                                          |                                                                                                                                                                                                                            |  | Date of Expiry |
|                                                                                       | January                                                                                                                                                                                                                    |  | dd/mm/yyyy     |
| Areas of Specialisation:                                                              |                                                                                                                                                                                                                            |  |                |
| Technical Domain:                                                                     | <input type="radio"/> Telecom<br><input type="radio"/> IT<br><input type="radio"/> Civil<br><input type="radio"/> Electrical<br><input type="radio"/> Finance<br><input type="radio"/> Others<br><input type="radio"/> NIL |  |                |
| Brief Description:                                                                    |                                                                                                                                                                                                                            |  |                |

Non-Technical Domain :

☐ Management

☐ Soft\_skills

☐ Others

☐ NIL

Brief Description:

Level of proposed Association\*:

☐ Vocational

☐ Engineering\_students

☐ Professional

☐ Top\_Management

☐ NIL

Short write up on your area of specialization(as specific as possible):

**Languages proficient in \*:**  
(for teaching and preparation of course material in various local languages)

**Institute Preferred** (3 choices in order of priority)\*:

**Whether any past teaching experience in BSNL** (Brief details in chronological order):

Submit