



# PUBLIC OFFICERS' WELFARE COUNCIL

Promoting the welfare of Public Officers and their families  
Operating under the aegis of the Ministry of Public Service and Administrative Reforms

Our Ref: POWC/FBL/25

Date: 31 January 2025

From: *Welfare Events Organiser, Public Officers' Welfare Council*

To: *Supervising Officers i/c Ministries/Departments*

## 7-ASIDE LADIES FOOTBALL FESTIVAL 2025

The Public Officers' Welfare Council (POWC) is proposing to organise a 7-Aside Ladies Football Festival for **female Public Officers only** during the month of **April**.

2. The 7-Aside Football Festival will be organised in two different categories as follows:
  - a) Ladies Civil Service 7-Aside Football Festival;
  - b) Ladies Disciplined Forces 7-Aside Football Festival;
3. The exact date and venue for holding the Festival will be communicated to participating teams in due course. Teams willing to participate should make their own arrangement for transport as well as release of players/officials from their respective Ministry/Department for training purposes and official matches. **Merging of teams will be allowed between two Ministries/Departments/Division only.**
4. Ministries/Departments willing to participate in the above Festival are requested to fill in the Participation Form at Annex A and submit same together with relevant documents to the **Welfare Events Organiser, Public Officers' Welfare Council, 12<sup>th</sup> Floor, SICOM Building 2, Cnr Chevreau and Reverend Jean LeBrun Streets, Port Louis, by latest Friday, 28 February 2025.**
5. **The Participation Form should be endorsed by the Supervising Officer and should bear the seal of the participating Ministry/Department. In case of non-compliance, the participation form will not be considered by the POWC.**
6. A meeting and the drawing of lots will be scheduled at the POWC on a date to be communicated to team managers in due course. The System of Play and the Rules and Regulations of the Festival will be communicated on the same day. The POWC reserves the right to cancel the 7-Aside Football Festival in case of any unforeseen circumstance.
7. It would be appreciated if you could arrange for the contents of this Circular Letter to be brought to the attention of Public Officers serving in your Ministry/Department. This Circular has also been posted on our **Facebook Page: POWC Mauritius** as well as the **POWC Website: <http://powc.govmu.org>.**

For any additional information, the secretariat can be contacted on **208 6658/208 0157** (office hours only).

**M.D. Boyjooonauth (Mrs)**  
**Welfare Events Organiser**

Copy to: *Presidents of Staff Welfare Associations*



Level 12, SICOM Building II, Corner Chevreau and Reverend Jean LeBrun Streets, Port Louis

Tel: 208 6658 / 208 0157 Fax: 208 6659

Email: powc@govmu.org Website: http://powc.govmu.org

**7 A-Side Ladies Football Festival 2025**

**Annex 1**

*Participation Form*

Ministry/Department: .....

Address: .....

Jerseys: Colour 1..... Colour 2 .....

Team Manager: ..... Tel: ..... Mobile: .....

Email Address: ..... Fax: .....

Sports Coach: ..... Tel: ..... Mobile: .....

Bank Account Name of Staff Welfare Association: .....

Bank Account Number ..... Bank Name:.....

	<i>Name of Players</i>	<i>National Identity No.</i>	<i>Designation</i>	<i>Actual Posting</i>
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				

- N.B:
- (1) *Each participating team, after having played all their matches, will be entitled to a grant of Rs 1500 which will be credited to its Staff Welfare Association as long as it operates a valid bank account.*
  - (2) *Minimum No of Players Required: 10*
  - (3) *We, the undersigned, acknowledge having taken cognizance of the rules and regulations of the Ladies Football Festival and undertake to comply with.*
  - (4) *We understand that the decision of the Board of the Public Officers' Welfare Council will be final and irrevocable.*
  - (5) *We certify that the players mentioned above are Public Officers and the information submitted is true.*

Signature of Team Manager: ..... Date.....

Signature of Human Resource Manager: ..... Name..... Tel:.....

Signature of Supervising Officer: ..... Name.....