**APPLICATION / NOMINATION FORM FOR**

**TECHNICAL CAPACITY BUILDING PROGRAM**

**TERM 2020**

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| APPLIED PROGRAM *(please* tick *for selection of the program and where to attend)*  |
|  | Training Program | *(please enter the code and name of the training of your choice given in the training lists)* |
|  | Research Project  | *(please enter the subject / title of your research project and choose the host country on the right side)* | Research Project Host Country |
|  Kingdom of Saudi Arabia  Bosnia & Herzegovina Republic of Turkey |

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| **APPLICANT NMI / DI**  |
|  *(please enter the name of the national metrology or designated institute of the applicant SMIIC member and observer state / country)*  |
| PERSONNEL DATA *(The names shall be as same as stated in your passport)* | *Photo file shall be attached**(not older than recent 6 months)* |
| Gender:  Female (Ms.)  Male (Mr.) | Date of Birth (Date/Month/Year):  |
| First Name:  | Passport Number:  |
| Family Name:  | Date of Issue (Date/Month/Year):  |
| Nationality:  | Date of Expiry (Date/Month/Year):  |
| Visa request :  Yes  No |
| Address :  |  | Mobile : |  |
| Phone :  |  |
| City/Province : |  | Fax : |  |
| Country :  |  | E\_mail : |  |
| Post Code : |  | Webpage: |  |
| **PROFESSIONAL INFORMATION** |
| Title and Profession: |  |
| Department/Lab: |  |
| EDUCATIONAL BACKGROUND*(commencing with the most recent academic degree/course)* |
| Years attended | Name of Institution | Place/Country | Major (Field of study) | Degree/Certificate awarded |
| from | to |
|  |  |  |  |  | Ph.D. |
|  |  |  |  |  | M.Sc. |
|  |  |  |  |  | B.S. |
| **KNOWLEDGE OF LANGUAGES** *(please tick* *where appropriate!)* |
|  | SPEAKING | READING | WRITING |
| Good  | Fair | Not easily | Good  | Fair  | Not easily | Good  | Fair | Noteasily |
| ENGLISH |  |  |  |  |  |  |  |  |  |
| OTHERS ( ) |  |  |  |  |  |  |  |  |  |
| **DESCRIPTIONS OF CURRENT JOB** *(Please describe your current job as detailed as possible! Use more space as appropriate!)*  |
|  |
| **PRIMARY OBJECTIVES INTENDED TO ACHIVE BY PARTICIPATING IN THIS COURSE** *(Use more space as appropriate.)* |
|  |
| *I hereby certify that the statements made by me in this application/nomination are true and correct in every respect.*Date (Date/Month/Year) : / / 2019 Name of Applicant : Signature of Applicant : Organization :  Country :  |

P.S: A copy of passport identification page and CV of each participant needs to be attached to the application form to be considered complete and officially accepted.