**Application Form 3rd** Modular Training on

Green Freight and Logistics Management in Mekong Countries

April 1-5, 2019

Mekong Institute, Khon Kaen, Thailand

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| Importance   * The program comprises of two phases as follows. * Learning phase - one-week training program at the Mekong Institute’s Residential Training Center, Khon Kaen, Thailand on **April 1-5, 2019** * Knowledge application phase – participants will implement the action plan(s) in his/her country within 3 months after completion of the training from April – July 2019. A MI’s team will provide technical assistance during the implementation. * An interested applicant should be aware of fully attendance the entire training period and implementation of the action plans after completion of the training. * The applicant is requested to provide information on the application form as stated below * The applicant need to submit (i) Filled Up Application Form as stated below (ii) Letter of Nomination from the organization along with project/activities to be set as the action plan implementation and (iii) Copy of Passport to Mr. Robby Rosandi at [robby@mekonginstitute.org](mailto:robby@mekonginstitute.org) and Mr. Sa-nga Sattanun at [sa-nga@mekonginstitute.org](mailto:sa-nga@mekonginstitute.org) by March 15, 2019 * Only selected candidates will be contacted to attend the training program. Once the flight ticket is issued, any cancellation or amendment fees are born by the selected candidate. * No written information will be sent to unsuccessful applicants. |

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| Part I: Participant’s Criteria |
| * Senior and mid-level government representatives (including Ministries of Transport, Energy and Environment, Port Authorities), * Private sector (Members and/or staff of Logistics Associations, Freight Forwarders Associations, Logistics Operators, Trucking Companies, Shipping Liners etc.) * Universities and logistics training institutes. * Basic degree or equivalent educational background with minimum of 3 to 5 years of working experience in transport and logistics business sector; * Able to communicate (speak, understand, read and write) in English; * Sufficient professional capacity to actively participate cross-culturally at an international level; * Committed to attend the entire training course; * Interactive and participative at the training; * Commit to implement action plan(s) upon return to their respective country; * Maintain effective coordination with the MI coordinator. |

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| Part II. Participants’ Statement | | | | | | | | | | | | |
| Title | | Given Name  (*As shown in Passport*) | | | Family Name  (*As shown in Passport*) | | | | | | | |
| [ ] Mr.[ ] Ms.[ ]Dr. | |  | | |  | | | | | | | |
| Nationality | | Country of Residence | | Passport | | | | Date of Birth | | | |
|  | |  | | Passport No.:  [ ] | | | | *Day* | *Month* | *Year* |
| Date of Expiry (Your passport must still be valid for more than 6 months): | | | |  |  |  |
| Position & Work Address (include department or section as relevant) | | | | | | Contacts | | | | | |
| Title of your position: ­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Division, Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | Tel:  Fax:  Mobile:  Email:  *[****Please provide an email address which is checked frequently]***  Website: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| Brief Description of Your Work Duties and Responsibilities | | | | | | | | | | | | |
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| Educational History | | | | | | | | | | | | |
| Years Attended | Institution Name, City, Country | | Degree, Diploma, Certificate, Training Courses completed | | | | Special fields of study | | | | | |
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| Languages Capacity | Read | | | Write | | | Speak | | | |
| Mother Tongue: | Excellent | Good | Fair | Excellent | Good | Fair | | Excellent | Good | Fair |
| English |  |  |  |  |  |  | |  |  |  |
| Others:  [PLEASE SPECIFY] |  |  |  |  |  |  | |  |  |  |

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| Action Plan for implementation: Please describe how you will utilize the knowledge from this training program back in your country / organization / company. |

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| I certify that I...………. (Candidate selection will be based on their compliance of the below stipulations.) |
| Please tick (√) in the box  I commit to fully attend all the activities of the program;  I commit to implement the action plan when I return to my country;  I will maintain effective coordination with the MI coordinator;  I have sufficient professional capacity to participate cross-culturally in regional event;  I will be interactive and participative at the training program;  I confirm that once the flight ticket is issued, any cancellation or amendment fees are born by me. |
| Undertaking by the applicant:  I certify that my statements in this application are true, complete and correct to the best of my knowledge and belief.  Applicants’ Signature: Date: |