****

Photo

 Photo

123, Mittraphap Road, Muang, Khon Kaen 40002 Thailand

Tel: +(66) 4320 2268 Fax: (+66) 4320 3656 Email: thantha@mekonginstitute.org

Website: [www.mekonginstitute.org](http://www.mekonginstitute.org)

**APPLICATION FORM**

Please fill in **all sections** of the application form and send it to Mekong Institute **before July 24, 2017.**

**Training Program Title: Energy Cooperation in the Greater Mekong Subregion**

**Training Duration:** **August 7-18, 2017**

**Full Name** (as shown in passport)**:** .............................................................. **Gender:** M [ ]  / F [ ]

**Passport Number:**..................... **Date of Issue:** ……………… **Date of Expiry:** …………

[DD/MM/YY]

[DD/MM/YY]

**Date of Birth:** ……….... **Religion:** ........................... **Nationality:** ………………………………

[DD/MM/YY]

**Closest International Airport** (Airport’s name and province)**:** .................................................

**Food Restriction** (if any)**:** .........................................................................................................

**Work Mailing Address:** ………………………………………………………………….………..

City : …………….………..Province/State: …………….…………...Country: …………….………..

Zip Code: …………….…..Office Telephone:…………….……….. Mobile:…………….………..

Fax: ………………………………….………..E-mail: …………….………..…………….………..

**Home Mailing Address:** ………………………………………………………………….………..

City : …………….………..Province/State: …….………….………..Country: …………….………..

Fax: ……………………………….….………..E-mail: …………….………..…………….………..

**Name and Contact Details of person to be notified in case of emergency:** ……..…………….…

Mobile:…………….……………………...….. E-mail: …………….………..…………….………..

|  |  |  |  |
| --- | --- | --- | --- |
| **Languages** | **Read** | **Write** | **Speak** |
| **Mother Tongue :**   | Excellent | Good | Fair | Excellent | Good | Fair | Excellent | Good | Fair |
| English | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Other [PLEASE SPECIFY] | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

|  |
| --- |
| **Education History** |
| Institution Name | City /Country | YearsAttended | Degree, Diploma, Certificate, training courses completed | Special fields ofstudy |
| From | To |
|  |  |  |  |  |  |
| Have you attended any program of Mekong Institute before? If yes, please specify…………… ………………………………………………………………….…………………..Year: ……………  |

|  |
| --- |
| **Employment History** |
| **Present position**: ……………from: ………………to Present[MM/YY]Organization Type:……………Ministry: ……………….………Department: ……………….…Division: ……………….…….. | Detailed description of your work duties andresponsibilities |
|  |
| **Present position**: ……………from: ………………to …………[MM/YY]Organization Type:……………Ministry: ……………….………Department: ……………….…Division: ……………….……..  | Detailed description of your work duties andresponsibilities |
|  |

**Expectations**

Please **write a short description** of your expectations indicating the knowledge and skills you really need. Describe what professional development is required for you to improve in your work.

|  |
| --- |
| I certify that my statements in this application are true, complete and correct to the best of my knowledge and belief.If accepted for a learning program/ workshop and/or scholarship, I will:1. carry out instructions and abide by conditions stipulated by the nominating government, scholarship sponsor and Mekong Institute.
2. follow the course learning schedule and abide by the rules of Mekong Institute
3. submit any progress reports which may be requested
4. return to my home country promptly upon completion of the learning program/ workshop
5. not hold Mekong Institute responsible or liable for any act or occurrence reasonably outside of their control

I also fully understand that to be granted a scholarship is an honor and privilege requiring the responsibility of dutifully representing my country and government.Signature of Applicant over Printed name: ………………………………Date: ………………………………Signature of Head of Organization over Printed name: ………………………………Date: ………………………………… |